


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2008 08:00 AM
Secretary of State


DOCUMENT # F02000005231

1. Entity Name
TED BAKER LIMITED, INC.



Principal Place of Business 415 TALMAGE RD SUITE D UKIAH, CA 95482	Mailing Address 415 TALMAGE RD SUITE D UKIAH, CA 95482
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DO NOT WRITE IN THIS SPACE



01082008 No Chg-P CR2E034 (11/05)

4. FEI Number 13-3953341	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**OPPENHEIM, STEVEN P
 800 BRICKELL AVE.
 SUITE 1107
 MIAMI, FL 33131**

DO NOT WRITE IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

U00000914945
 05/08/08-80077-013 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PC KELVIN, RAYMOND 800 BRICKELL AVE STE 1107 MIAMI, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD GREEN, RICHARD 800 BRICKELL AVE STE 1107 MIAMI, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD PAGE, LINDSAY 800 BRICKELL AVE STE 1107 MIAMI, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS OPPENHEIM, STEVEN P 800 BRICKELL AVE., SUITE 1107 MIAMI, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Steven P. Oppenheim* **STEVEN P. OPPENHEIM**
 ASST SECRETARY 4/22/08 305-371-8555

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #