FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 PM 3:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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****200.00 ****200.00
DO NOT WRITE IN THIS SPACE

DOCUMENT # F94000000215

1. Corporation Name

Baita International, Inc.

Principal Place of Business / Mailing Address

8130 Baymeadows Way West
Suite 302
Jacksonville, FL 32256

3. Date Incorporated or Qualified: 1/14/94	3a. Date of Last Report: 2/22/94
4. FEI Number: 59-2440463	☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under § 199.032, Florida Statutes ☐ Yes ☒ No	

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. — 22	Suite, Apt. #, etc. — 27
City & State — 23	City & State — 28
Zip — 24 / County — 25	Zip — 29 / County — 30

9. Name and Address of Current Registered Agent

Reto J. Schneider
8130 Baymeadows Way West
Suite 302
Jacksonville, FL 32256

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City — FL — 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1509, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: r e t . — DATE

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE: P,D NAME: Reto J. Schneider STREET ADDRESS: 8130 Baymeadows Way W. CITY ST ZIP: Jacksonville, FL 32256	☐ Change ☐ Addition
TITLE: S NAME: Daniel J. Gallagher STREET ADDRESS: 50 N. Laura St., Suite 3900 CITY ST ZIP: Jacksonville, FL 32202	☐ Change ☐ Addition
TITLE: D NAME: Peter Bratschi STREET ADDRESS: 8130 Baymeadows Way West CITY ST ZIP: Jacksonville, FL 32256	☐ Change ☐ Addition
TITLE: VP NAME: Walter H. Bryant STREET ADDRESS: 8130 Baymeadows Way West CITY ST ZIP: Jacksonville, FL 32256	☐ Change ☐ Addition
TITLE: V NAME: Coen Purvis STREET ADDRESS: 8130 Baymeadows Way West CITY ST ZIP: Jacksonville, FL 32256	☐ Change ☐ Addition
TITLE: NAME: STREET ADDRESS: CITY ST ZIP:	☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), 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 12 or Block 13 (if changed or added) above or on an attachment with an address.

SIGNATURE: e t . — 4/28/95 — (904) 739-1235

SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL — Title — Daytime Phone Number