

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 18, 2005 08:00 AM
Secretary of State

DOCUMENT # F96000004980

1. Entity Name
BAKER TANKS, INC.



Principal Place of Business

3020 OLD RANCH PKWY
SUITE 220
SEAL BEACH, CA 90740

Mailing Address

3020 OLD RANCH PKWY
SUITE 220
SEAL BEACH, CA 90740



01052005 No Chg-P CR2E034 (10/03)

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4. FEI Number
36-4104940

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LEXIS DOCUMENT SERVICES
1201 HAYS STREET
TALLAHASSEE, FL 32301

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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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

000000182502
01/19/05-80029-015 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LOBO, RICHARD A 10 S. WACKER DRIVE CHICAGO, IL 60606
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LHEE, EDWARD M 10 S. WACKER DRIVE CHICAGO, IL 60606
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SIMMONS, BRIAN P 10 S. WACKER DRIVE CHICAGO, IL 60606
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LIVINGSTON, BRYAN 3020 OLD RANCH PKWY #200 SEAL BEACH, CA 90740
TITLE NAME STREET ADDRESS CITY-ST-ZIP	COO LIVINGSTON, BRYAN 3020 OLD RANCH PKWY SEAL BEACH, CA 90740
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCFO LUX, BRUCE 3020 OLD RANCH PKWY SEAL BEACH, CA 90740

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12. I hereby certify that the information supplied with this filing 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #