

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 04, 2001 8:00 am
Secretary of State

03-21-2001 90042 016 ***150.00

DOCUMENT # **P00000076556** ✓

1. Entity Name

Ideal Time Solutions, Inc. . . .

Principal Place of Business

Mailing Address

4290 Mahogany Ridge Dr. Same
Weston, FL 33331

2. Principal Place of Business

3. Mailing Address

4290 Mahogany Ridge Dr.**Same**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

none**none**

City & State

City & State

Weston FL**Same**

Zip

Zip

Country

Country

33331**USA**

4. FEI Number

Applied For

65-1036833

Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Christopher Shawn Baker
4290 Mahogany Ridge Dr.
Weston, FL 33331

Name

Christopher S. Baker

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

4290 Mahogany Ridge Dr.

City

Weston

FL

Zip Code

33331

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.

SIGNATURE

J. Michael Baker **V.P. Christopher S. Baker** **2/28/01**
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when translating) **03/30/01** DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00**After MAY 1, 2001 Fee will be \$550.00****Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
President
 NAME **Christopher Shawn Baker**
 STREET ADDRESS **4290 Mahogany Ridge Dr.**
 CITY-ST-ZIP **Weston FL 33331**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME **Vice President**
 STREET ADDRESS **Ida Rachael Baker**
 CITY-ST-ZIP **4290 Mahogany Ridge Dr. Weston, FL 33331**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
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 STREET ADDRESS
 CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

J. Michael Baker
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/28/01
 Date

954-349-1535
 Daytime Phone #

03/30/01

CR2E034 (1/100)