FILED
Apr 25, 2003 8:00 am
Secretary of State

04-25-2003 90281 046 ***158.75

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000114522

1. Entity Name
BAKER PRODUCTIONS, INC.

Principal Place of Business	Mailing Address
9544 NW 52ND PLACE CORAL SPRINGS, FL 33076	9544 NW 52ND PLACE CORAL SPRINGS, FL 33076

2. Principal Place of Business: 1853 N.W 97th ter Coral Springs FL 33071
Suite, Apt. #, etc.
City & State
Zip — Country

3. Mailing Address: 1853 N.W 97th ter coral springs FL 33071
Suite, Apt. #, etc.
City & State
Zip — Country

☑ CHECK HERE IF MAKING CHANGES

4. FEI Number: 65-1070829 — ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ — $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SLATER, ROBERT W
214 BRAZILIAN AVE
#260
PALM BEACH, FL 33480

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City — FL — Zip Code

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, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BAKER, HOWARD 9544 NW 52ND PLACE CORAL SPRINGS, FL 33076	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Howard Baker 1853 N.W 97th ter, coral Springs FL 33071	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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CR2E034 (10/02)

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: Howard Baker — 4-22-03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #