

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 02, 2002 8:00 am
Secretary of State

04-02-2002 90109 017 ***150.00

DOCUMENT # P01000094188

1. Entity Name

BALTIC SUN INC.

DO NOT WRITE IN THIS SPACE

B0056734

2. Principal Place of Business

214 HIBISCUS AVE.

3. Mailing Address

SAME

Suite, Apt. #, etc.
APT.#5

Suite, Apt. #, etc.

City & State

POMPANO BEACH, FL

City & State

Zip

33062

Country

U.S.A.

Zip

Country

4. FEI Number

65-1139125

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

ANDRIUS PETRIKAS

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

214 HIBISCUS AVE. #5

City

POMPANO BEACH

FL

Zip Code

33062

**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.

SIGNATURE

Andrius Petrikas

ANDRIUS PETRIKAS (PRESIDENT)

03/19/02

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible

*Tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PRESIDENT
ANDRIUS PETRIKAS
214 HIBISCUS AVE. #5
POMPANO BEACH, FL 33062**

TITLE
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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Andrius Petrikas

**ANDRIUS PETRIKAS
PRESIDENT**

03/19/02 (954)649-3466

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)