## DOCUMENT # P03000133757 1. Entity Name BAKER ELECTRIC, INC. Principal Place of Business 25751 SW 152 COURT HOMESTEAD, FL 33032 US DO NOT WRITE IN THIS SPACE

FILED Jan 22, 2007 08:00 AM Secretary of State



01152007

CR2E034 (11/05)

FEI Number
 20-0395357

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
RERT T

BAKER, ROBERT T 25751 SW 152 COURT HOMESTEAD, FL 33032

## DO NOT WRITE IN THIS SPACE

No Chg-P

			10874			4.4
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 the if applicable. (NOTE, Registered Agent algusture required when reinsisting)				DATE		
FiLE NOW!!! FEE 18 \$150.00 After May 1, 2007 Fee will be \$550.00		Election Campaign Finar Trust Fund Contribution.		\$5.00 May Be Added to Fees	000000596308 01/23/07-80074-003	150.00
10.	OFFICERS AND DIREC	CTORS				
HILE NAME STREEL ADDRESS CITY-ST-ZIP	P BAKER, ROBERT T 25751 SW 152 COURT HOMESTEAD, FL 33032					
HTLE NAME STREET ADDRESS CITY-SI-ZIP						
NAME STREET ADDRESS CITY-SI-7P				DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN.	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
THLE NAME STREET ADDRESS CITY-ST-ZIP						
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes, I further certify that the information						

The restrict of the information supplied with this filling oces not quality for the exemptions contained in Chapter 119, Florida Statutes. Further certify that the information indicated on this report or suppliemental 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

1-15-07

305 246 0670

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