

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 21, 2008 8:00 am
Secretary of State

05-21-2008 90026 021 ***150.00

DOCUMENT # P07000009723

1. Entity Name

BAKER HARRIS GROUP INC.



Principal Place of Business

3200 PORT ROYALE DR., N.
#704
FT. LAUDERDALE FL 33308
US

Mailing Address

3200 PORT ROYALE DR., N.
#704
FT. LAUDERDALE FL 33308
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

22-3952852

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

1st MOORE

CR2E034 (10/07)

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

OSCEOLA, MARCELLUS
3200 PORT ROYALE DR., N.
#704
FT. LAUDERDALE FL 33308

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 changing agent)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2008 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

TITLE	DIR	☐ Delete
NAME	OSCEOLA, WILLIAM T	
STREET ADDRESS	3200 PORT ROYALE DR. #704	
CITY-ST-ZIP	FT. LAUDERDALE FL 33308	
TITLE	CHAIRMAN - DIR	☐ Delete
NAME	OSCEOLA, MARCELLUS	
STREET ADDRESS	3200 PORT ROYALE DR. N. #704	
CITY-ST-ZIP	FT. LAUDERDALE, FL. 33308	
TITLE	PRESIDENT - DIR	☐ Delete
NAME	KLINE, JOEL	
STREET ADDRESS	3200 PORT ROYALE DR. N. #704	
CITY-ST-ZIP	FT. LAUDERDALE, FL. 33308	
TITLE	SECRETARY - DIR	☐ Delete
NAME	KLINE, STARLETT	
STREET ADDRESS	3200 PORT ROYALE DR. N. #704	
CITY-ST-ZIP	FT. LAUDERDALE, FL. 33308	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
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 Section 119, 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:

Starlett Kline STARLETT KLINE, SECRETARY

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/22/08

954-771-9810