FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT 1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 29 1996 8:00 am
Secretary of State

DOCUMENT # P94000092840 (5)

1. Corporation Name
ROBERT B. BAKER, P.A.

Principal Place of Business
~~7000 W PALMETTO PARK ROAD~~
~~SUITE 203~~
~~BOCA RATON FL 33433~~

Mailing Address
~~7000 W PALMETTO PARK ROAD~~
~~SUITE 203~~
~~BOCA RATON FL 33433~~

3. Date Incorporated or Qualified: 12/23/1994
3a. Date of Last Report: 04/10/1995

2. Principal Place of Business
21 2300 Glades Rd.
Suite, Apt. #, etc. 22 400 W
City & State 23 Boca Raton Fla
Zip 24 33431 Country 25

2a. Mailing Address
26 2300 Glades Rd.
Suite, Apt. #, etc. 27 400 W
City & State 28 Boca Raton Fla
Zip 29 33431 Country 30

4. FEI Number 59-3294259 ~~APPLIED FOR~~ ☐ Applied For ☐ Not Applicable

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

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent
CORPORATION INFORMATION SERVICES, INC.
1201 HAYS STREET
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent
81 Name: Robert Baker
82 Street Address (P.O. Box Number is Not Acceptable): 2300 Glades Rd. Suite 400 W
83
84 City: Boca Raton FL 85 Zip Code: 33431

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE [signature] Signature of registered agent ... DATE 4/22/96

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PSTD	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	BAKER, ROBERT B		1.2 NAME	
STREET ADDRESS	~~7000 W PALMETTO PARK ROAD SUITE 203~~ 2300 Glades Rd.		1.3 STREET ADDRESS	
CITY-ST-ZIP	~~BOCA RATON FL 33433~~ Boca Raton, Fl 33431		1.4 CITY-ST-ZIP	
TITLE		☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME			2.2 NAME	
STREET ADDRESS			2.3 STREET ADDRESS	
CITY-ST-ZIP			2.4 CITY-ST-ZIP	
TITLE		☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4 CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4.2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

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AEB
4-29-96

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date 4/22/96 Daytime Phone #