

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 03, 1999 8:00 am
Secretary of State

05-03-1999 90119 002 ***150.00

DOCUMENT # P95000084879

1. Corporation Name

BAXTER TECHNOLOGIES, INC.



Principal Place of Business

1296 MARTINIQUE CT
MARCO ISLAND FL 34145
US

Mailing Address

P O BOX 711
MARCO ISLAND FL 34146
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/02/1995

4. FEI Number

65-0658750

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 owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 980 Cape Marco Dr.

Suite, Apt. #, etc.

22 APT. # 805

City & State

23 MARCO Island, FL.

Zip

24 34145

Country

25 Collier

2a. Mailing Address

26 980 Cape Marco Dr.

Suite, Apt. #, etc.

27 APT. # 805

City & State

28 Marco Island, FL.

Zip

29 34145

Country

30 Collier

9. Name and Address of Current Registered Agent

BAXTER, JOHN F
1296 MARTINIQUE CT
MARCO ISLAND FL 34145

10. Name and Address of New Registered Agent

81 Name Baxter, John F., Jr.
82 Street Address (P.O. Box Number is Not Acceptable)
980 Cape Marco Dr.
83 APT. # 805
84 City Marco, Island, FL 85 Zip Code 34145

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

JOHN F. BAXTER JR. PRES

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

(NOTE: Registered Agent signature required when reinstating)

DATE

John F. Baxter Jr. 4-13-99

12. OFFICERS AND DIRECTORS

TITLE DTP
NAME BAXTER, JOHN F JR
STREET ADDRESS 1296 MARTINIQUE CT
CITY-ST-ZIP MARCO ISLAND FL

TITLE DV
NAME BAXTER, JOHN F JR
STREET ADDRESS 1296 MARTINIQUE CT
CITY-ST-ZIP MARCO ISLAND FL

TITLE DS
NAME ROMANO, LUISE
STREET ADDRESS 930 HERON CT
CITY-ST-ZIP MARCO ISLAND FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS 980 Cape Marco Dr, Apt. # 805
1.4 CITY-ST-ZIP Marco Island, FL. 34145

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS 980 Cape Marco Dr., Apt. # 805
2.4 CITY-ST-ZIP Marco Island, FL. 34145

3.1 TITLE ☒ Change ☐ Addition
3.2 NAME John Russell
3.3 STREET ADDRESS 60 EAST 12th ST.
3.4 CITY-ST-ZIP New York, N.Y., 10003

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-13-99 (1941) 642-8225

CR2E034 (11/98)