

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000021609

FILED  
Apr 24, 2007  
Secretary of State

Entity Name: ARTISAN/BAKER-CONSULTANT OF AMERICA, INC.

**Current Principal Place of Business:**

P O BOX 140596  
CORAL GABLES, FL 33114

**New Principal Place of Business:**

7084 NW 50TH STREET  
MIAMI, FL 33166

**Current Mailing Address:**

P O BOX 140596  
CORAL GABLES, FL 33114

**New Mailing Address:**

FEI Number: 65-0820252

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CAZENAVE, THIERRY  
13680 NW 19 AVE  
SUITE # 18  
MIAMI, FL 33054 US

**Name and Address of New Registered Agent:**

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: CAZENAVE, THIERRY  
Address: PO BOX 140596  
City-St-Zip: CORAL GABLES, FL 33114

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THIERRY CAZENAVE

PRES

04/24/2007

Electronic Signature of Signing Officer or Director

Date