

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**  
**Apr 15, 1999 8:00 am**  
**Secretary of State**

04-15-1999 90131 049 \*\*\*150.00

**DOCUMENT # P98000080589**

1. Corporation Name

**TYSON & BAKER, INC.**



Principal Place of Business

**4675 PONCE DE LEON BLVD., STE. 301  
CORAL GABLES FL 33146**

Mailing Address

**4675 PONCE DE LEON BLVD., STE. 301  
CORAL GABLES FL 33146**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**09/14/1998**

4. FEI Number

**650867591**

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

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

29

Zip

Country

Zip

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BAKER, RONALD G  
4675 PONCE DE LEON BLVD., STE. 301  
CORAL GABLES FL 33146**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

**FL**

85 Zip Code

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

**D  
TYSON, PETER R  
10301 S.W. 10TH ST.  
MIAMI FL 33176**

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

**D  
BAKER, L.A.  
8236-C SEVERN DR.  
BOCA RATON FL 33433**

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

☐ DELETE

TITLE  
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CITY-STATE-ZIP

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STREET ADDRESS  
CITY-STATE-ZIP

☐ DELETE

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-STATE-ZIP

☐ Change ☐ Addition

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-STATE-ZIP

☐ Change ☐ Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-STATE-ZIP

☐ Change ☐ Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-STATE-ZIP

☐ Change ☐ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-STATE-ZIP

☐ Change ☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-STATE-ZIP

☐ Change ☐ Addition

SIGNATURE:

**SIGNATURE REQUIRED**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**12 APRIL 99**

**561-883-0073**

Date

Daytime Phone #

CR2E034 (11/98)