
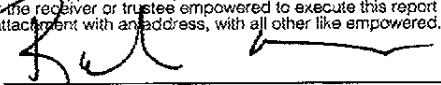


**2004 FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 08, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P99000006663</b>		
1. Entity Name <b>ROBIN BAUMANN, INC.</b>		
Principal Place of Business <b>5401 N. BAY RD. MIAMI BEACH, FL 33140</b>	Mailing Address <b>5401 N. BAY RD. MIAMI BEACH, FL 33140</b>	
<b>DO NOT WRITE IN THIS SPACE</b>		
6. Name and Address of Current Registered Agent  <b>BAUMANN, ROBIN 5401 N. BAY RD. MIAMI BEACH, FL 33140</b>		<b>DO NOT WRITE IN THIS SPACE</b>
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when relistating)</small>		
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BAUMANN, ROBIN 5401 N. BAY RD. MIAMI BEACH, FL 33140	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
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12. 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 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: 		<b>01/08/04-80014-007 150.00</b>  <b>DO NOT WRITE IN THIS SPACE</b>
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR <b>Robin Baumann</b>		Date <b>Jan 08, 2004</b> Daytime Phone # <b>3058687114</b>



01062004 No Chg-P CR2E034 (10/03)

4. FEI Number <b>65-0893024</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	