

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
SEATTLE, WASHINGTON
Secretary of State
TALLAHASSEE, FLORIDA 32301

APPROVED
FILED

90 MAY - 1 JUN 1995

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **S82139**

(4)

1. Incorporation Name

LUCIA BAEZ PRODUCTIONS, INC.

2. Principal Office Address

**135-W-CENTRAL BLVD
SUITE-1000
ORLANDO-FL-32801**

3. Mailing Address

**135-W-CENTRAL BLVD.
SUITE-1000
ORLANDO-FL-32801**

DO NOT WRITE IN THIS SPACE

3. Date first reported or filed 09/23/1991	3a. Date of Last Report 08/18/1994
4. FFI Number 59-3084447	Applied Fee Not Applicable
5. Certificate of Status: Domestic ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
7. This corporation has, directly or indirectly, for the purpose of the Uniform Gifts to Minors Act (UGMA) or the Uniform Transfers to Minors Act (UTMA), transferred property to a minor or transferee of a minor.	☐ Yes ☒ No

2. Principal Office Address	2a. Mailing Address
21. 319 N. Ferncreck Ave	26. 319 N. Ferncreck Avenue
22. ORLANDO FL	27. ORLANDO FL
23. 32801	28. 32801
24. 32801	29. 32801
25. 32801	30. 32801

9. Name and Address of Current Registered Agent

**BAEZ, LUCIA M
135-W-CENTRAL BLVD.
SUITE-1000
ORLANDO-FL-32801**

10. Name and Address of New Registered Agent

81. Name	82. Street Address (if applicable)	83. City	84. State	85. Zip
	319 N. Ferncreck Avenue	ORLANDO	FL	32801

11. I, the undersigned, being a resident of the State of Florida, do hereby certify that the above information is true and correct to the best of my knowledge and belief, and that I am a resident of the State of Florida.

12. ADDITIONAL CHANGES TO OFFICIAL RECORDS	13. ADDITIONAL CHANGES TO OFFICIAL RECORDS
DP BAEZ, LUCIA M. 135-W-CENTRAL BLVD. STE 1000 ORLANDO-FL-32801	319 N. Ferncreck Avenue ORLANDO FL 32801

14. I, the undersigned, being a resident of the State of Florida, do hereby certify that the above information is true and correct to the best of my knowledge and belief, and that I am a resident of the State of Florida.

SIGNATURE:

INITIALS AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/95 (401) 894-5297