

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

**FILED**  
**Jan 24 1997 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
 Secretary of State  
 DIVISION OF CORPORATIONS

DOCUMENT # **V32074** (9)

1. Corporation Name  
**BAKER NORTON U.S., INC.**



Principal Place of Business: **8800 N.W. 36 ST MIAMI FL 33178**  
 Mailing Address: **8800 N.W. 36 ST MIAMI FL 33178-2404**

3. Date Incorporated or Qualified: **04/28/1992**  
 3a. Date of Last Report: **01/30/1996**

21	2. Principal Place of Business <b>4400 Biscayne Boulevard</b>	22	2a. Mailing Address <b>4400 Biscayne Boulevard</b>	23	4. FEI Number <b>65-0393912</b>	Applied For Not Applicable
22	City & State <b>Miami, Florida</b>	27	City & State <b>Miami, Florida</b>	24	5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
23	Zip <b>33137</b>	28	Country <b>USA</b>	25	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
24	29	30	31	32	33	34

9. Name and Address of Current Registered Agent <b>TABERNILLA, ARMANDO A 8800 NW 36TH STREET MIAMI FL 33178</b>				10. Name and Address of New Registered Agent			
81	Name <b>Tabernilla, Armando A.</b>			85	Zip Code <b>33137</b>		
82	Street Address (P.O. Box Number is Not Acceptable) <b>4400 Biscayne Boulevard</b>						
83							
84	City <b>Miami</b>		85	State <b>FL</b>			

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: \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<del>DP</del> <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<del>PFENNIGER, RICHARD G.</del>	1.2 NAME	
STREET ADDRESS	<del>8800 N.W. 36 ST.</del>	1.3 STREET ADDRESS	<b>SEE ATTACHED LIST</b>
CITY - ST - ZIP	<del>MIAMI FL</del>	1.4 CITY - ST - ZIP	
TITLE	<del>DS</del> <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<del>TABERNILLA, ARMANDO A.</del>	2.2 NAME	
STREET ADDRESS	<del>8800 N.W. 36TH STREET</del>	2.3 STREET ADDRESS	
CITY - ST - ZIP	<del>MIAMI FL</del>	2.4 CITY - ST - ZIP	
TITLE	<del>T</del> <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<del>ZINZI, ANDREW</del>	3.2 NAME	
STREET ADDRESS	<del>8800 NW 36TH STREET</del>	3.3 STREET ADDRESS	
CITY - ST - ZIP	<del>MIAMI FL</del>	3.4 CITY - ST - ZIP	
TITLE	<del>AD</del> <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<del>RUBIN, DORA B.</del>	4.2 NAME	
STREET ADDRESS	<del>8800 NW 36TH ST</del>	4.3 STREET ADDRESS	
CITY - ST - ZIP	<del>MIAMI FL</del>	4.4 CITY - ST - ZIP	
TITLE	<del>AT</del> <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<del>SIEGEL, JORDAN</del>	5.2 NAME	
STREET ADDRESS	<del>8800 NW 36 STREET</del>	5.3 STREET ADDRESS	
CITY - ST - ZIP	<del>MIAMI FL</del>	5.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do 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.

SIGNATURE: Dora Rubin **Dora B. Rubin** 1/19/97 Date **305-575-6000** Daytime Phone

CR2E034 (9/96)

**1997 FLORIDA CORPORATION ANNUAL REPORT**  
**BAKER NORTON U.S., INC.**  
**Question 13**

**PD**

**Pfenniger, Jr., Richard C.**  
**4400 Biscayne Boulevard, Miami, FL 33137**

**SD**

**Tabernilla, Armando A.**  
**4400 Biscayne Boulevard, Miami, FL 33137**

**AT**

**Siegel, Jordan**  
**4400 Biscayne Boulevard, Miami, FL 33137**

**AS**

**Rubin, Dora B.**  
**4400 Biscayne Boulevard, Miami, FL 33137**