2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2007
Secretary of State

DOCUMENT# N49273

Entity Name: INTERNATIONAL INSTITUTE FOR BAUBIOLOGIE & ECOLOGY, INC.

Current Principal Place of Business:

1401-A CLEVELAND ST.
CLEARWATER, FL 33755 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 387
CLEARWATER, FL 33757 US

New Mailing Address:

FEI Number: 59-3162702 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ZIEHE, HELMUT
1401-A CLEVELAND ST
CLEARWATER, FL 33755 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

OFFICERS AND DIRECTORS:

Title:	D	( ) Delete
Name:	ZIEHE, HELMUT,	
Address:	2402 ECUADORIAN WAY #54	
City-St-Zip:	CLEARWATER, FL 33763	
Title:	D	( ) Delete
Name:	LEWIS, TORI,	
Address:	1623 N HIGHLAND AVE	
City-St-Zip:	CLEARWATER, FL 33755	
Title:	D	( ) Delete
Name:	BURMASTER, M. SPARK	
Address:	1592 OVERSON LANE	
City-St-Zip:	CHASEBURG, WI 54621	
Title:	D	( ) Delete
Name:	STELLER, ROBERT	
Address:	24 ABERDEEN AVE	
City-St-Zip:	HAMILTON, ON L8P 2N5 CA	
Title:	D	( ) Delete
Name:	GUST, LARRY	
Address:	1930 WEST SAN MARCOS BLVD	
City-St-Zip:	SAN MARCOS, CA 92069	
Title:	D	( ) Delete
Name:	DAVIS, MARTINE	
Address:	186 1250TH ST	
City-St-Zip:	MIDDLETOWN, IL 62666	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HELMUT ZIEHE DIR 04/24/2007

Electronic Signature of Signing Officer or Director — Date