ANNU	PROFIT PORATION IAL REPORT		Secre	ARTMENT OF B. Morthach lary of State CORPORAT					
1. Corporation	** *		(2)						
B.A.U	RISK MANAGEMENT, INC.	•							
Principal Place 7900 PETEI P.O. BOX 1	RS ROAD # 8200		ddress PETERS ROAD BOX 16717	# B200		I I OELEGOU (HILD INDIA ELEG	I DIRIR RUDIN MULUM	130 1 011 0 40 411 701 4	IUM GIQM DIQM 1003
	N FL 33318-6717		ITATION FL 330	118-6717		3. Date Incorporated or Qua 04/07/1981	alified 3a. D	ate of Last F 05/01/	Report 1005
2. Principal Pla	ce of Business	2a. Mailin	g Address			4. FEI Number		00/01/	Applied For
Suite, Apt. #	nio	26	Ant H ata			59-2344636			Not Applicable
2	, orc.	27	Apt #, etc.			5. Certificate of Status Desir	red 🔲		5 Additional Required
City & State		Oity 8	State			Election Campaign Finani Trust Fund Contribution	cing	\$5.0	May Be
Ζιρ 4	Country	Zip		Country	,	8. This corporation has liabil			
	25 9. Name and Address of Current	29 Registered /	Agent	<u> </u> 30		Florida Statutes [10. Name and Address of I	Yes □ No New Reolstere	d Agent	
EI ADID	A CORRORATE OFFICE INC			81	Name				-··· -
	DA CORPORATE SERVICES, INC. 8TH STREET			82	Street Add	ress (P.O. Box Number is Not Ac	ceptable)		
	FL 33131			83					
				84	City			Test 7	- 0-1-
11 Pureuant to	the provisions of Postions 607.0500 a	ad 602 (50)	FI- 17 61 4 1	84	'		F		p Code
	the provisions of Sections 607.0502 a diagent, or both, in the State of Florida n, and accept the obligations of, Section			es the above		ration submits this statement for t rd of directors. Thereby accept th		<u> </u>	
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SIGNATURE AND TYPED OR PRINTED NAME OF STONING OFFICER OR DIRECTOR

SIGNATURE: 1