

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L57219

1. Entity Name

KARL BUSCH INVESTMENTS, INC.

FILED
Feb 16, 2000 8:00 am
Secretary of State

02-16-2000 90057 008 ***163.75

Principal Place of Business

% ANNETTE R. BUSCH
1820 NE JENSEN BCH BLVD BOX 587
JENSEN BCH FL 34957

Mailing Address

PMB 587
1820 NE JENSEN BEACH BLVD
JENSEN BEACH FL 34957-7212

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BUSCH, ANNETTE R.

~~2355 NE OCEAN BLVD UNIT A 31~~

~~STUART FL 34996~~

Name

BUSCH, ANNETTE, R.

Street Address (P.O. Box Number is Not Acceptable)

~~618 NE Jensen Beach Blvd~~

City

Jensen Bch

FL

Zip Code

34957

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

ANNETTE BUSCH

FEB. 10-2000

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.

☒

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PTD
BUSCH, KARL H
~~2355 NE OCEAN BLVD 31A~~
~~STUART FL~~

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PTD
BUSCH, KARL H.
618 NE Jensen Beach Blvd
Jensen Bch FL 34957

☒ Change ☐ Addition

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☐ Change ☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

KARL H. BUSCH

FEB-10-2000 561 334 7700

Date

Daytime Phone #