

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 10, 2003 8:00 am
Secretary of State

03-10-2003 90168 004 ***150.00

DOCUMENT # L70717

1. Entity Name
BABO CORPORATION



Principal Place of Business
100 LOVERS LANE
201 W
FORT MYERS BEACH FL 33931

Mailing Address
100 LOVERS LANE
201 W
FORT MYERS BEACH FL 33931

2. Principal Place of Business
53 Pompano St
Suite, Apt. #, etc.

3. Mailing Address
P.O. Box 2517
Suite, Apt. #, etc.



☐ CHECK HERE IF MAKING CHANGES

City & State
Ft. Myers Beach FL

City & State
Ft. Myers Beach FL

4. FEI Number **65-0211858**

Applied For
Not Applicable

Zip **33931** **Country** **USA**

Zip **33932** **Country** **USA**

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

BACHER, ULRICH
100 LOVERS LANE SUITE 200
FORT MYERS BEACH FL 33931

7. Name and Address of New Registered Agent

Name

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

City **Ft. Myers Beach FL** **Zip Code** **33931**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Ulrich Bacher* **ULRICH BACHER**

3-6-03

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
Trust Fund Contribution.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PTD	<input type="checkbox"/> Delete
NAME	BACHER, ULRICH	
STREET ADDRESS	53 POMPANO ST	
CITY-ST-ZIP	FT MYERS BCH FL 33931	
TITLE	DVS	<input type="checkbox"/> Delete
NAME	BOETEL, EDGAR	
STREET ADDRESS	53 POMPANO ST	
CITY-ST-ZIP	FT MYERS BEACH FL 33931	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
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CITY-ST-ZIP		

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Ulrich Bacher* **ULRICH BACHER - President**

3-6-03

239-463-4211

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)