

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000041866

FILED
Apr 14, 2008
Secretary of State

Entity Name: BOHEMIA AGENCY HOLDING, INC.

Current Principal Place of Business:

15560 MCGREGOR BLVD.
UNIT # 8
FT. MYERS, FL 33908

New Principal Place of Business:

Current Mailing Address:

5109 DEL PRADO BLVD.
CAPE CORAL, FL 33904

New Mailing Address:

FEI Number: 65-1003874

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARTEL, VIOLA
5109 DEL PRADO BLVD.
CAPE CORAL, FL 33904 US

Name and Address of New Registered Agent:

COLLINS, VIOLA
5109 DEL PRADO BLVD.
CAPE CORAL, FL 33904 US

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: VIOLA COLLINS

04/14/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPVS () Delete
Name: JAVORSKY, JIRI
Address: P.O BOX 1243
City-St-Zip: OSTFILDERN, GERMANY, 73748

Title: T () Delete
Name: ROESSLE, SIBYLLE F
Address: RIEGELSTR. 57
City-St-Zip: OSTFILDERN, GERMANY, D 73760 D

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JIRI JAVORSKY

DPVS

04/14/2008

Electronic Signature of Signing Officer or Director

Date