


**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P00000102157 1. Entity Name IBO Inc.	
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FILED

03 JUL 14 AM 11:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2135 Palm Bay Rd Suite, Apt. #, etc. 7	3. Mailing Address 2135 Palm Bay Rd Suite, Apt. #, etc. 7
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DO NOT WRITE IN THIS SPACE

City & State Palm Bay Florida	City & State Palm Bay Florida	4. FEI Number	Applied For Not Applicable
Zip 32905	Country USA	Zip 32905	Country USA

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

DO NOT WRITE IN THIS SPACE	7. Name and Address of Current Registered Agent	
	Name Sevinc, Bayram	
	Street Address (P.O. Box Number is Not Acceptable) 2135 Palm Bay Rd	
	City Palm Bay	FL Zip Code 32905

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 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE
January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P Turkmen, Ibrahim 2135 Palm Bay Rd Palm Bay FL 32905	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP Sevinc, Bayram 2135 Palm Bay Rd Palm Bay FL 32905	TITLE NAME STREET ADDRESS CITY - ST - ZIP	100021515371 07/14/03--01027--005 **150.00
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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 on an attachment with an address, with all other like empowered.

SIGNATURE:  V.P. <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	07-07-03 <small>Date</small>	(321) 724-0907 <small>Daytime Phone #</small>
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CR2E034B (12/02)

JA 7/14

IBO, Inc.
2135 Palm Bay Rd NE
Palm Bay FL 32905

July 7th , 2003

Division of Corporation
PO Box 6227
Tallahassee, FL 32314

RE: UBR for IBO, Inc.

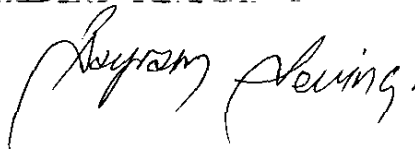
To Whom It May Concern:

Please find enclosed a check in the amount of \$150.00 and information for my Uniform Business Report. I respectfully request your forbearance for my late filing, but I never received a reminder for my annual report.

I thank you for your help in this matter.

Very truly yours,

Bayram Sevinc

A handwritten signature in cursive script, reading "Bayram Sevinc", written in black ink.