

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P35735** (0)

1. Corporation Name

BANK JULIUS BAER & CO. LTD.

Principal Place of Business

Mailing Address

**BAHNHOFSTRASSE 36, CH-8010
ZURICH, SWITZERLAND**

**BAHNHOFSTRASSE 36, CH-8010
ZURICH, SWITZERLAND**



2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

10/01/1991

3a. Date of Last Report

04/20/1995

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution



**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

**BAUR, THOMAS ESQ.
BAUR, MILLER & WEBNER, P.A.
100 N. BISCAYNE BOULEVARD, 21ST FLOOR
MIAMI FL 33132**

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when re-stating)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

**CD
BAER, HANS J.
PILGERWEG 7, CH-8044
ZURICH SW**

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

**VCD
KARRER, ROBERT
LOORENRANK 32, CH-8053
ZURICH, SWITZERLAND**

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

**P
LUTHI, JUERGEN
SCHUTZENHAUSSTRASSE 8, CH-8707
UETIKON AM SEE SW**

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

**V
LAAGER, DR. FRIEDRICH
AM GUGGENBERG 16, CH-8053
ZURICH SW**

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

**S
BOPP, HARRY H.
IM HALDENACHER 7, CH-8907
WETTSWIL, SWITZERLAND**

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

**T
RUETSCH, FRANZ
KAHLWIES/PF 16, CH-8414
BUCH AM IRCHEL SW**

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

G. Kue / VP

April 10, 1996

++41/1/228511

CR2E034 (12/95)