

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 13, 2005 8:00 am
Secretary of State

04-13-2005 90065 024 ***150.00

DOCUMENT # P35735

1. Entity Name
BANK JULIUS BAER & CO. LTD.



Principal Place of Business
**BAHNHOFSTRASSE 36, CH-8010
ZURICH, SW 8010**

Mailing Address
**BAHNHOFSTRASSE 36, CH-8010
ZURICH, SW 8010**



03182005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

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

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

**DO NOT WRITE
IN THIS SPACE**

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 _____

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, 2005 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	KUEPFER, PETER
STREET ADDRESS	ROTFLUHSTRASSE 83
CITY-ST-ZIP	ZOLLINKON SWITZERLAND, CH-872
TITLE	D
NAME	BAER, ANDREAS J
STREET ADDRESS	FOHRENSTRASSE 19
CITY-ST-ZIP	ERLENBACH SWITZERLAND, CH-873
TITLE	D
NAME	BAER, RAYMOND J
STREET ADDRESS	GOLDHALDENSTRASSE 3
CITY-ST-ZIP	ZOLLIKON, SWITZERLAND, CH-872
TITLE	D
NAME	BAER, MARC
STREET ADDRESS	WINKEL WIESE 6
CITY-ST-ZIP	ZURICH SWITZERLAND, CH-801
TITLE	D
NAME	BAER, RUDOLF E
STREET ADDRESS	PELICAN RD, LEEWARD
CITY-ST-ZIP	BRITISH WEST INDIES,
TITLE	D
NAME	BOREL, DANIEL
STREET ADDRESS	C/O LOGITECH SA, MOULIN DU CHOC D
CITY-ST-ZIP	ROMANEL SWITZERLAND, CH-112

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information provided 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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CHRISTIAN MULLER

18 March 2005