

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P93000069556 (7)**

1. Corporation Name

BAUHS INC.



Principal Place of Business

**P.O. BOX 656
LIVE OAK FL 32060**

Mailing Address

**P.O. BOX 656
LIVE OAK FL 32060**

2. Principal Place of Business

2a. Mailing Address

21

State, Apt. #, etc.

26

State, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

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9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified
09/30/1993

3a. Date of Last Report
03/03/1995

4. FEI Number

65-0438263

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

10. Name and Address of New Registered Agent

B1

Name

B2

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

B3

B4

City

FL

B5 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 of person to be registered as agent (if applicable)

Signature of Registered Agent (signature required when transferring)

Date

12. OFFICERS AND DIRECTORS

1. TITLE

☐ DELETE

2. NAME

**D
SCHROM, WOLFRAM
P.O. BOX 656 N/A
LIVE OAK FL 32060**

3. STREET ADDRESS

4. CITY - ST - ZIP

5. TITLE

6. NAME

7. STREET ADDRESS

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