

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Sep 02, 2005 08:00 A
Secretary of State

DOCUMENT # P94000038654

1. Entity Name
MLK BAUTRAEGER, INC.



Principal Place of Business
2640 RCA BLVD
SUITE 107
PALM BEACH GARDENS, FL 33410 US

Mailing Address
2640 RCA BLVD
SUITE 107
PALM BEACH GARDENS, FL 33410 US



06072005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0500162
Applied For
Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PIERCE, JOHN T
2560 RCA BLVD
PALM BEACH GARDENS, FL 33410

**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 (file if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE P
NAME KRATZEL, LOTHAR
STREET ADDRESS 2560 RCA BLVD, STE 107
CITY-ST-ZIP PALM BEACH GARDENS, FL 33410

TITLE D
NAME PIERCE, JOHN T
STREET ADDRESS 2560 RCA BLVD, STE 107
CITY-ST-ZIP PALM BEACH GARDENS, FL 33410

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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IN THIS SPACE**

09/07/05-400201-001 158.75

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 #