

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

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Candice B. Norstrom
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 MAY -1 AM 9:19

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # P94000094040

1. Corporation Name

BABO INTERNATIONAL BROKERS, INC.

300001476879

05/05/95--01020--016

******200.00 ****200.00**

DO NOT WRITE IN THIS SPACE

Principal Place of Business
**53 Pompano St.
Ft. Myers Beach, FL
33931**

Mailing Address
**c/o John P. Milligan, Jr.
Milligan & Signorella
1500 Colonial Blvd., #103
Ft. Myers, FL 33907**

3. Date Incorporated or Qualified
12/29/94

3a. Date of Last Report

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 ZIP
24 Country

2a. Mailing Address
25 Suite, Apt. #, etc.
26 City & State
27 ZIP
28 Country

4. FEI Number
65-0549481

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**John P. Milligan, Jr., Esq.
Milligan & Signorella, P.A.
1500 Colonial Blvd., #103
Ft. Myers, FL 33907**

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 the corporation)

DATE

DATE

12. OFFICERS AND DIRECTORS

TITLE P/T/D
NAME Ulrich Bacher
STREET ADDRESS 53 Pompano St.
CITY, ST, ZIP Ft. Myers Beach, FL 33931

TITLE VP/S/D
NAME Edgar Boetel
STREET ADDRESS 53 Pompano St.
CITY, ST, ZIP Ft. Myers Beach, FL 33931

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

TITLE
NAME
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CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY, ST, ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY, ST, ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY, ST, ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY, ST, ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY, ST, ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY, ST, ZIP

5/1/95 *U.B.*

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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. 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 of Block 13, respectively, or on an attachment with an address.

SIGNATURE:

Ulrich Bacher
Ulrich Bacher President

4-25-95 **813-463-4211**