## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

Mailing Address

C/O JOHN P. MILLIGAN. JR. 1500 COLONIAL BLVD.. #103

FT. MEYERS FL 33907-1025

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

FT MYERS BEACH FL 33931

53 POMPANO ST.



FLORIDA DEPARTMENT OF STATE

**FILED** 

Feb 27 1997 8:00am

Secretary of State

3. Date Incorporated or Qualified 3a. Date of Last Report

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P94000094040 (0)

BABO INTERNATIONAL BROKERS, INC.

I am an officer or director of the corporation or the rece appears in Block 12 or Block 13 if changed, or on an al

SIGNATURE:

•							12/29/1994	03/26/1996		
2. Principal P	lace of Business	2a. Mailing	2a. Mailing Address				4. FEI Number			oplied For
21		26	26				65-0549481	····		ot Applicable
Suite, Apt	#, etc.	Suite,	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional
22		27					To bottom of bottom bottom		Fee Ro	equired
City & Stat	€	City &	State				6. Election Campaign Financing	_		May Be
23		28				<u></u>	Trust Fund Contribution			to Fees
Zip	Country	Zip		Coun	try		<b>B.</b> This corporation has liability fo			. 199.032,
24	25	29		30	_		7 10-1001 0 12-10-100	Yes		
	9. Name and Address of Curre	ent Registered A	ugent		31		10. Name and Address of New R	egistered	Agent	
MILLIGAN, JOHN P JR.					?'	Name				
C/O MILLIGAN & SIGNORELLA, P.A.					82 Street Address (P.O. Box Number is Not Acceptable)					
1500 COLONIAL BLVD., #103 FORT MYERS FL 33907					33					
				ŀε	34	City		-	<b>85</b> Zip	Code
	28.8 1.21.4					. •		FL	<b></b>	
11. Pursuant	to the provisions of Sections 607.09 remistered agent, or both, in the Sta	502 and 607.1508 te of Florida, Suc	3, Florida Statu h change was	tes, the abo authorized	ove hv	-named corp	oration submits this statement for the ion's board of directors. I hereby acc	purpose o ept the ap	of changing i pointment as	ts registered registered
agent. I a	im familiar with, and accept the obl	gations of, Section	on 607.0505, Fl	lorida Statu	ies	i	2 200.2 5, 0.00000 7 (10.00) 000			
SIGNATURE			,,			<b></b>				
	Styriative typical or profest name of registered a		bic (NO		Age	nt signature require	ed when reinstating)	DATE	IN DIDECTO	DO IN 10
12.		ND DIRECTORS	DELETE	13.	_		ADDITIONS/CHANGES TO OFF	ICEHS AN	Change	Addition
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NAME •	BACHER, ULRICH			1.2 NAM	-					
STREET ADDRESS	53 POMPANO ST.					ADDRESS				
CITA - ST - ZIP	FT MYERS BEACH FL 33931	***************************************	Descri	1.4 CITY	_	T-ZIP			Change	Addition
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NAME	BOETEL, EDGAR			2.2 NAN	-					
STREET ADDRESS	53 POMPANO ST.					ADDRESS				
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NAME	•			3 2 NAN			,	***		
\$TREET ADORESS						ADDRESS				
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NAME				4 2 NA		*BD0500				
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PILE DAM			m briteit						L. viidige	, Addition
NAME				5 2 NAM		***************************************				
STREET ADDRESS						ADDRESS				
CHY-SI-7.F			DELETE	5.4 CITY 6.1 TITU		1 - ZIP			Change	Addition
TifLF			T DETELE	l l					Orange Land	L. Address
NAME				6.2 NAN						
STREET ADDRESS						ADDRESS				
CiTY-\$1-715	L cont. H. of the information	and with this files	dose not acc	6.4 CIT	Y-S	T-ZIP	Lin Section 119 07/3\/i) Florida Statu	toe I furth	or cortifu the	t the
informati	any centry that are information stopp on indicated on this annual report o officer or director of the comoration	r supplemental a or the receiver o	nnual toport is tradice empo	true and ac wered to ex	CCL	rate and that ute this repor	d in Section 119.07(3)(i), Florida Statu my signature shall have the same le t as required by Chapter 607, Florida	gal effect a Statutes;	as if made ur and that my	nder oath; that name