

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000057832

Entity Name: BAB N.Y. INVESTMENT, CORP.

FILED  
Apr 23, 2008  
Secretary of State

## Current Principal Place of Business:

1835 EAST HALLANDALE BLVD  
SUITE 520  
HALLANDALE BEACH, FL 33009 US

## Current Mailing Address:

1835 EAST HALLANDALE BLVD  
SUITE 520  
HALLANDALE BEACH, FL 33009 US

FEI Number: 65-0600750

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

VEIT, FRANK  
1835 EAST HALLANDALE BLVD  
SUITE 520  
HALLANDALE BEACH, FL 33009 US

## New Principal Place of Business:

1835 EAST HALLANDALE BLVD  
SUITE #520  
HALLANDALE BEACH, FL 33009 US

## New Mailing Address:

1835 EAST HALLANDALE BLVD  
SUITE #520  
HALLANDALE BEACH, FL 33009 US

## Name and Address of New Registered Agent:

VEIT, FRANK  
1835 EAST HALLANDALE BLVD  
SUITE #520  
HALLANDALE BEACH, FL 33009 US

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.

SIGNATURE: FRANK VEIT

04/23/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SCHICKER, VOLKMAR DR  
Address: SPIEGEL GASSE 19  
City-St-Zip: WEIN, AU 1010

Title: VP ( ) Delete  
Name: SCHICKER, HEIDE  
Address: SPIEGEL GASSE 19  
City-St-Zip: WEIN, AU 1010

Title: S (X) Delete  
Name: VEIT, FRANK  
Address: 1835 EAST HALLANDALE BLVD SUITE 520  
City-St-Zip: HALLANDALE BEACH, FL 33009

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: SCHICKER, VOLKMAR DR  
Address: SPIEGEL GASSE 19  
City-St-Zip: VIENNA / AUSTRIA, AT 1010 AT

Title: VP (X) Change ( ) Addition  
Name: SCHICKER, HEIDE  
Address: SPIEGEL GASSE 19  
City-St-Zip: VIENNA / AUSTRIA, AT 1010 AT

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: VOLKMAR SCHICKER

P

04/23/2008

Electronic Signature of Signing Officer or Director

Date