

**03 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P97000091629

1. Entity Name

Ratgo Corporation

FILED
Mar 13, 2003 8:00 A.M.
Secretary of State

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2524 S.W. 31st Street
Suite, Apt. #, etc.

3. Mailing Address

2524 S.W. 31st Street
Suite, Apt. #, etc.

City & State

Cape Coral, Florida

City & State

Cape Coral, Florida

Zip

33914

Country

USA

Zip

33914

Country

USA

4. FEI Number

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Darrin R. Schutt, Esq.

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

1105 Cape Coral Parkway, East

Suite C

City

Cape Coral

FL

Zip Code

33904

**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.

SIGNATURE

Signature of the principal officer or registered agent and the officer or registered agent

Darrin R. Schutt

(If the Registered Agent signature is required, attach a copy)

2-27-03

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
D
Uwe Clausen
2524 S.W. 31st Street
Cape Coral, Florida 33914

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

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IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, trustee, or person empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other fees empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03-11-03 239-542 6364

DATE

Signature Printed

CR2E034B (12/01)

yi slin