

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 17, 2005 8:00 am
Secretary of State

08-17-2005 90002 015 ***558.75

DOCUMENT # P98000021088

1. Entity Name
BACHO, INC.



Principal Place of Business
**10281 SW 20 STREET
MIAMI, FL 33165 US**

Mailing Address
**601 BRICKELL KEY DRIVE
STE 507
MIAMI, FL 33131 US**

50062036



2. Principal Place of Business

14950 SW 179 Ave

3. Mailing Address

Suite, Apt. #, etc.

03252005

Chg-P

CR2E034 (10/03)

City & State

Miami FL

City & State

Suite, Apt. #, etc.

4. FEI Number

65-0823890

Applied For

Not Applicable

Zip

33196

Country

Zip

Country

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**IAG CORPORATE SERVICES, INC.
601 BRICKELL KEY DRIVE, SUITE 507
MIAMI, FL 33131**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME BASTANZURI, REMERTO
STREET ADDRESS 10281 SW 20TH STREET
CITY-ST-ZIP MIAMI, FL 33165

TITLE DST ☐ Delete
NAME BASTANZURI, ROSA
STREET ADDRESS 10281 SW 20TH STREET
CITY-ST-ZIP MIAMI, FL 33165

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE REMBERTO BASTANZURI ☒ Change ☐ Addition
NAME 10281 SW 20th STREET
STREET ADDRESS MIAMI, FLORIDA 33165
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 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:

REMBERTO BASTANZURI, MANAGER

(305) 371-9213

Date **8-17-05**