2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P98000021088

1. Entity Name
BACHO, INC.

Principal Place of Business	Mailing Address
14950 SW 179 AVE MIAMI, FL 33196 US	601 BRICKELL KEY DRIVE STE 507 MIAMI, FL 33131 US

DO NOT WRITE IN THIS SPACE

02142008   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
65-0823890	Not Applicable

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

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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

05/14/08-80035-022 158.75

FILE NOW!!! FEE IS $150.00
After May 1, 2008 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
NAME	BASTANZURI, REMBERTO
STREET ADDRESS	14950 SW 179 AVE
CITY-ST-ZIP	MIAMI, FL 33196

TITLE	DST
NAME	BASTANZURI, ROSA
STREET ADDRESS	14950 SW 179 AVE
CITY-ST-ZIP	MIAMI, FL 33196

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: _____   4/16/08   (305)371.9213
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #

remberto bastanzuri, president