

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000025139

1. Entity Name

BAULEITUNGS-UND BAUBETREUUGSSERVICE CORP.

FILED
May 15, 2001 8:00 am
Secretary of State

05-15-2001 90123 039 ***158.75

Principal Place of Business

Mailing Address

1710 E CAPE CORAL PKWY
 CAPE CORAL FL 33904

1710 EAST CAPE CORAL PKWY
 CAPE CORAL FL 33904

00052562



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

3501 DEL PRADO BLVD. S

3501 DEL PRADO BLVD. S

Suite, Apt. #, etc.

Suite, Apt. #, etc.

200

200

City & State

City & State

CAPE CORAL FLOKIDA

CAPE CORAL FLOKIDA

Zip

Country

Zip

Country

33904

USA

33904

USA

4. FEI Number

65-0887807

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RIEWLINGER, THOMAS
 1710 EAST CAPE CORAL PKY
 CAPE CORAL FL 33904

Name

RIEDLINGER THOMAS

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

3501 DEL PRADO BLVD. SOUTH, SUITE 200

City

CAPE CORAL

FL

Zip Code

33904

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, typed or printed name of registered agent and title if applicable.

THOMAS RIEDLINGER - PRESIDENT

04-01-01

(NOTE: Registered Agent signature required when reinstating)

DATE

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

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PVST ☐ Delete
 NAME RIEDLINGER, THOMAS
 STREET ADDRESS 1710 EAST CAPE CORAL PKWY
 CITY-ST-ZIP CAPE CORAL FL 33904

TITLE PVST ☒ Change ☐ Addition
 NAME RIEDLINGER, THOMAS
 STREET ADDRESS 3501 DEL PRADO BLVD. SOUTH, SUITE 200
 CITY-ST-ZIP CAPE CORAL, FL 33904

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
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TITLE ☐ Delete
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 CITY-ST-ZIP

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

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 or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

THOMAS RIEDLINGER

04-01-01

Date

944-945-3899

Daytime Phone #

CR2E034 (10/00)