

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000097007

Entity Name: B.B.P., INC.

FILED
Feb 15, 2004
Secretary of State

Current Principal Place of Business:

1228 21ST AVE. SE
CAPE CORAL, FL

New Principal Place of Business:

Current Mailing Address:

1228 21ST AVE. SE
CAPE CORAL, FL

New Mailing Address:

FEI Number: 65-0975413

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROLLINGS, HARVEY
1633 SE 47TH TERR.
CAPE CORAL, FL 33904 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BOEHM, HANS
Address: CH-1135 DENENS
City-St-Zip: SWITZERLAND,

Title: S () Delete
Name: BOEHM, ROLF
Address: CH-9034 EGGERSRIET
City-St-Zip: SWITZERLAND,

Title: T () Delete
Name: PERSIJN, URSULA
Address: CH-9034 EGGERSRIET
City-St-Zip: SWITZERLAND,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: BOEHM HANS

PD

02/15/2004

Electronic Signature of Signing Officer or Director

Date