## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT # 353034**

1. Corporation Name

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STRASSER INCORPORATED

Principal Place	of Business	Mailing Address	<del></del> .		t 1882 mg (tiệt stres trep ann	e.e. e.e. d.e.		
		1301-8TH AVENUE, W.						
301-8TH AVENUE. W.  BRADENTON FL 34205  BRADENTON FL 34205					DO NOT W	RITE IN THIS S	PACE	
					3. Date Incorporated or Qualifed			
					09/30/1969			,
		A Mailian Address			4. FEI Number		Appl	ied For
<ol><li>Principal Pl</li></ol>	ace of Business	2a. Mailing Address			59-1273545		Not	Applicable
1		Suite, Apt. #, etc.			·		<b>\$8.75</b> Ad	Iditional
Suite, Apt.	#, etc.	— — · · ·			5. Certifcate of Status Desired	ا ا 	Fee Req	uired
2		City & State			6. Election Campaign Financi	ng 🗆	\$5.00 M	fay Be
City & State	e	28			Trust Fund Contribution		Added to	Fees
3	Country	Zip	Count		8. This corporation owes the	current year Intar	ngible	
Zip	25	29	30		Personal Property Tax.		<i>Z</i> \	∐ <u>No</u>
4	9. Name and Address of Curre				10. Name and Address of Ne	w Registered A	geht	
	3. Haile and Address of Care		8	1 Name				ļ
STR	ASSER, LARRY J		ا	2 Street Add	ress (P.O. Box Number is Not Acc	eptable)		
1301-8TH AVENUE, W.				_ Olloccirius	the state of the s	property of the same of		-14 7 21 17)
BRADENTON, FL		8	3			<b>化性制剂</b>	100	
34205			L.			tation in an existent fift	85 Zip C	ode
	to the provisions of Sections 607.0		-	City		FL	1 1	
agent. I a	to the provisions of Sections 607.01 registered agent, or both, in the Stal arm familiar with, and accept the obligation of the stall signature, typed or printed name of registered a	gallons of, decilon corresco, i			and when reinstating) ( 12 200)	DATE		
42	Signature, typed of planted name of registeros				od milon rome sam syl)			
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO		D DIRECTO	RS IN 12
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ME OF SIGNING OFFICER OR DIRECTOR

DELETE

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 annual report of supplemental annual 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 of rustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter, or on an attackment with an address, with all other like empowered.

**FILED** 

Feb 16, 1999 8:00am

**Secretary of State** 

02-16-1999 90028 013 \*\*\*150.00

Change

☐ Addition