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

PROFIT CORPORATION **ANNUAL REPORT** 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 1. Corporation Name 556181

(6)

HOLZ ENTERPRISES, INC.

FILED Mar 03 1998 8:00am Secretary of State



!								
Principal Place of Business Mailing Address				I ADDIAN BEING BLIEB BIRDE FABA	il diale mai biola bibli di	fir Brain Gibil	1 81611 1881	
3563 COMMERCIAL WAY SPRINGHILL FL 34606		3563 COMMERCIAL WAY SPRINGHILL FL 34806		DO NO	· FWRITE IN THIS SP	'ACE		
				3. Date Incorporated or Qu	alified			
				12/28/1977				
	Place of Business	2a. Mailing Address		4. FEI Number		Ap	plied For	
21 366	3 COMMERCIAL WAY	26 3663 COMME	RCIAL WA	y 59-1785350	<u></u>		ot Applicable	
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Des	ired 🔲	\$8.75 A		
City & Stat		City & State	u . - ,	6. Election Campaign Finar		\$5.00		
23 SPR 1		28 SPRING A	HILL FL	Trust Fund Contribution		Added t	o Fees	
Zip	Country	Zip	Country	8. This corporation owes or			_ ~	
24 3460	9. Name and Address of Curren	29 34606 3	30 HERNAN	Personal Property Tax de 10. Name and Address of I			J No	
110		Luedistelen wiletif	81 Name	10. Name and Address of t	ARM HEDISTELED WE	Bitt		
	OLZ, NORBERT SR.	HOLZ, NORBERT	SR					
3563 COMMERCIAL WAY				82 Street Address (P.O. Box Number is Not Acceptable)				
340	806		83	63 COMMERCIAL	- WAY			
] " [
			84 City	000001		85 Zip (Code	
ad Duament	to the man inions of Continue CO7 CEO	0 and 007 1500 Florida Dist to		PRING HILL	FL	376	604	
office or r	to the provisions of Sections 607.050; registered agent, or both, in the State	of Florida. Such change was at	uthorized by the corr	corporation submits this statement in poration's board of directors. I hereb	or the purpose of cl	nanging its ntment as	s registered registered	
✓ agent la	im familiar with, and accept the obliga	itions of, Section 607.0505, Flor	ida Statutes.			. / .	Ť	
SIGNATURE	forung Hos	Z	Registered Agent signature		2/2	<u> </u>		
12.	Signature, typed or printed name of regisfored age OFFICERS AND		13.	ADDITIONS/CHANGES TO	OFFICERS AND F	VIDECTOR	C IN 12	
TITLE	ST	DELETE	1.1 TITLE	ADDITIONS/CHANGES IN		Change	Addition	
NAME	LESTER, LUCY F	Jan Della II	1.2 NAME		_	_ vgv	1.00	
STREET ADDRESS	4116 THUNGERBIRD AVE		1.3 STREET ADDRESS				İ	
CITY-ST-ZIP	SPRING HILL, FL 60000		1.4 CITY-ST-ZIP					
TITLE	PD	☐ DELETE	2.1 TITLE			Change	Addition	
NAME	HOLZ, NORBERT SR.		2.2 NAME		•			
STREET ADDRESS	3563 COMMERCIAL WAY		2.3 STREET ADDRESS	3663 Commerci	al WA	Y		
CITY-ST-ZIP	SPRING HILL FL		2. 4 CITY - ST - ZIP	SPRING HILL FL	34606	,		
TITLE	ST	DELETE	3.1 TITLE	31.000 000		Change	Addition	
NAME	HOLZ, LYDIA C		3.2 NAME		_	- •		
STREET ADDRESS	3144 FLAMINGO BLVD.		3.3 STREET ADDRESS				ſ	
City-St-ZiP	SPRING HILL FL		3.4. CITY-ST-ZIP					
TITLE		DELETE	4.1 TITLE		L	Change	Addition	
NAME		_	4. 2 NAME			-		
STREET ADDRESS			4.3 STREET ADDRESS				[
CITY-ST-ZIP			4.4 CITY - ST - ZIP					
TITLE		DELETE	5.1 TITLE			Change	Addition	
NAME			5.2 NAME			•		
STREET ADDRESS			5.3 STREET ADDRESS					
CITY-ST-ZIP			5.4 CITY - ST - ZIP				j	
TITLE		☐ DELETE	6.1 TITLE			Change	Addition	
NAME			6.2 NAME			-		
STREET ADDRESS			6.3 STREET ADDRESS					
CITY-ST-ZIP			6.4 CITY-ST-ZIP					
14. I hereby o	certify that the information supplied wi	th this filing does not qualify for	the exemption state	d in Section 119.07(3)(i), Florida Sta	tutes. I further certif	y that the	information	
indicated officer or	on this annual report or supplementa director of the corporation or the rece or Block 13 if changed, or on an attac	I annual report is true and accuiver or trustee empowered to ex	rate and that my sig	nature shall have the same legal effe	ect as if made unde	r oath; tha	ntlam an	

Norbert Holz, President 2/22/60