## 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 # H04227**

## FILED Apr 19, 1999 8:00 am Secretary of State

04-19-1999 90084 043 \*\*\*150.00

1.	Corporation	Auser, Inc.	Mailing Address						
ļ	28 S. TAMIAN		6826 S. TAMIAMI TRAIL						
SARASOTA FL 34231 SARASOTA FL 34231						DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualifed	3 SFACE		1
						05/18/1984	······		
2.	Principal Pla	ncipal Place of Business 2a. Mailing Address				4. FEI Number	<del></del>	Applied For	}
21		·	26	<u> </u>		59-2416513		Not Applicable Additional	1
<u> </u>	Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired		Required	
22	City & State	& State City & State			<u> </u>	6. Election Campaign Financing		May Be	17
23	City & State	28				Trust Fund Contribution Added to Fe			
-	Zip			Country	,	8. This corporation owes the current year		_	
24		25	29 3	0		Personal Property Tax.	☐ Yes	□No _	-
		9. Name and Address of Current	Registered Agent			10. Name and Address of New Registere	d Agent		1
ļ	CLA	ICED CTEVICAL IEDDV		81	Name	_			1
GLAUSER, STEVEN JERRY 6828 S. TAMIAMI TRAIL				82	Street Addre	ess (P.O. Box Number is Not Acceptable)			
SARASOTA FL 34231				83					1
Ì	Onto			03					1
				84	City	F	85 Zij	p Code	-
1	1 Pursuant f	to the provisions of Sections 607 0502	2 and 607.1508. Florida Statutes	, the abov	e-named corpo	oration submits this statement for the purpose on's board of directors. I hereby accept the app		its registered	1
{	agent. I ar IGNATURE	egistered agent, or both, in the State of familiar with, and accept the obligat	ions of, Section 607.0505, Florid	a Grandes	the corporations.		ointment as	registered	
1:		Olgitudes, types of printed in a second seco		13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECT	TORS IN 12	] :
-	ne T	PD	☐ DELETE	1,1 TITLE		· ·	Chang	e	]
NAME STREET ADDRESS CITY-ST-ZIP		GLAUSER, STEVEN JERRY		1,2 NAME					1
		6828 S. TAMIAMI TRAIL		1,3 STREET ADDRESS					}
		SARASOTA FL		1,4 CITY- S	ST-ZIP				4
Tr	n.e.		☐ DELETE				☐ Chang	e	1
NAME				2.2 NAMÉ	Ì	•			1
STREET ADDRESS					TADDRESS				
CITY-ST-ZIP			DELETE		GT-ZIP=		☐ Chang	e Addition	4~
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[	REET ADDRESS				TADORESS				.
1				3.4. CITY-				_	
TITLE			☐ DELETE	4.1 TITLE			☐ Chang	e Addition	]
}	WE I			4, 2 NAME					1
1	REET ADDRESS			4.3 STREE	TADDRESS				}
CITY-ST-ZIP				4.4 CITY- 8	ST-ZIP				4
TITLE			☐ DELETE	5.1 TITLE			Chang	e Addition	1
N	WE			5.2 NAME		Ł			
s	REET ADDRESS				TADDRESS				-
-	TY-ST-ZIP			5.4 CITY-S 6.1 TITLE			Chang	e 🔲 Addition	1
i	TLE		☐ DELETE	6.2 NAME	1		[_] Chang		ļ
1	AME REET ADDRESS				T ADDRESS				
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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 or 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 or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 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

<u>4)13)</u>99

941-923-3441

Daytime Phone i