COND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999

DRIESLER ENTERPRISES, INC.

DOCUMENT # 1. Corporation Name



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Aug 27, 1999 8:00 am Secretary of State

08-27-1999 90003 017 ***158.75



Principal Place of Business Mailing Address								,,0,, 0,011 87		.,
140 S. WOODLAWN AVENUE P.O. BOX 2190 BARTOW FL 33830 BARTOW FL 33831 US US						DO NOT WRIT	E IN THIS	SPACE		
00						3. Date Incorporated or Qualified 09/15/1989				
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number			Applied Fo	or
21		26				65-0156831			Not Applic	able
Suite, Apt. #, etc.		Suite, Apt: #, etc.				5. Certificate of Status Desired	\mathbf{X}		Additional Additional Required	al
<u>!2</u>		City & State				 				
City & State		City & State			6. Election Campaign Financing Trust Fund Contribution			O May Be d to Fees	•	
Zip	Country	Zip	Cou	ntry		8. This corporation owes the curre	nt year			
4	25	├ ─┐ '	30	•		Intangible Personal Property.		Yes	∏ No	
	9. Name and Address of Current	Registered Agent				10. Name and Address of New R	egistered /	Agent		
DDII	ESI ED EDIC C			81 Na	me					-
	esler, eric C. S. Woodlawn avenue	82 Street A			eet Addre	ess (P.O. Box Number is Not Accepta	ble)			
	RTOW FL 33830			<u> </u>		···				
Uni				83						
				84 Ci	y		FL	85 Zi	p Code	
						ation authority this statement for the cu		anging its	rogistored	
11. Pursuant office or	to the provisions of sections 607.6503 registered agent, or both, in the State of any familiar with, and accept the obligation	f Floride. Such change was a	s, the about	ove-nam d by the	corporatio	ation submits this statement for the pu in's board of directors. I hereby accep	t the appoir	itment as	registered	i
agent. I a	amy familiar with, and accept the obligati		rida Stat	tutes.	scre	ROLLINGTO	7/22/9	19		
SIGNATURE .	Signature, typed or printed name of registered agent a	ind tille it applicable. (NO	TE: Registe	red Agent s	ignature requi	ired when reinstating)	DATE	<i></i>		٠
12.	OFFICERS AND		13.		-	ADDITIONS/CHANGES TO OFF	ICERS AN	D DIREC	TORS IN	12
TITLE	PVST/o	DELETE	1.1 Tr	TLE				Change	e 🔲 Ad	12
NAME	DRIESLER, ERIC C.	1.21		ME						- 13
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CITY-ST-ZIP	BARTOW FL 33830		1.4 CI	TY-ST-ZIP						
TITLE	-0 -	DELETE	2.1 TI	TLE			-	Change	a L Ad	dition
NAME	DRIESLER; ERIC C.	- death	2.2 NA	AME						
STREET ADDRESS	140 S. WOODLAWN AVENUE	Dupincule	2.3 ST	REET ADOR	ESS					
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STREET ADDRESS			6.3 ST	REET ADDR	ESS					
CITY-ST-ZIP				TY-ST-ZIP						
indicated of	ertify that the information supplied with to on this annual report or supplemental a or director of the corporation or the rece	nnual report is true and accur	ate and execute	that my :	sionature i	shall have the same legal effect as it	made unde	r oatn, tha	atiam	
in Block 1	2 or Block 13 if changed, or on an attac	brent with an address	ILER				,			,

610065-90003-17 L16845

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Driesler Enterprises, Inc. 140 S. Woodlawn Avenue Bartow, FL 33830 (941) 534-9424

July 23, 1999

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: Driesler Enterprises, Inc. (L16845) Annual Report

Dear Sir or Madam,

We have received a second notice from your office requesting that we file an annual report. We have no record of having received a first notice. Therefore, we have enclosed a check payable to the Department of State in the amount of \$158.75, representing the annual fee of \$150.00, and for the certificate of status fee of \$8.75.

Please accept our report and our payment as payment in full as we did not receive your first notice. Thank you for your consideration and cooperation in this matter.

Very Truly Yøgrs,

Eric C. Driesler, President