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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9600093070 1. Corporation Name

LOESER, INC.

FILED Feb 11, 1999 8:00am **Secretary of State**

02-11-1999 90035 044 ***150.00



		14 W 14-1-1		·		
Principal Place	of Business	Mailing Address				
10589 BRENDLE	ROAD	10589 BRENDLE ROAD Myakka City Fl 34251				*·
MYAKKA CITY F	L 34251	MIARRA OIT IE 54251		DO NOT WRITE IN THIS SPACE		
				3. Date Incorporated or Qualifed		
				11/12/1996		
a Deingingt Di	ace of Business	2a. Mailing Address		4. FEI Number	Applie	
Z. Plincipai Fii	ace of Business	26		65-0722743		
Suite, Apt. 1	tt etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Add	
Suite, Apt. 7	, , e.c.	27				
City & State		City & State		6. Election Campaign Financing	\$5.00 Ma	-
- 7 ´		28		Trust Fund Contribution	Added to F	-ees
23	Country	Zip	Country	8. This corporation owes the current ye	ar Intangible	1610
Zip	25	29 30	<u> </u>	Personal Property Tax.		No
24	9. Name and Address of Currer			10. Name and Address of New Regist	тегед Адепт	
	5. Hairie and Address of Surfer		81 Name			_
I OF	SER, NANCY		82 Street A	Address (P.O. Box Number is Not Acceptable)		
1050	9 BRENDLE ROAD		OZ SUEBLA	the transfer of the first market with the	1 4 mile 7 m 4 m 1 6 7 m 1 4 m	:::::::::
	KKA CITY FL 34251		83	1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	5毫多學樣。維持特質	
141 177	MA OIT I'E O'EST			[李] [[1] [[1] [[1] [[1] [[1] [[1] [[1] [85 Zip Co	de
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11.1 March 18 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	, , , , , , , , , , , , , , , , , , ,	00 L 007 4E09 Elorida Statutes	the above-named of	corporation submits this statement for the purporation's board of directors. I hereby accept the	ose of changing its re	egistered
11. Pursuant	to the provisions of Sections 607.056	of Florida. Such change was aut	horized by the corpo	corporation submits this statement for the purporation's board of directors, I hereby accept the	appointment as regis	10.00
agent. I a	egistered agent, or both, in the State im familiar with, and accept the obligation	ations of, Section 607.0505, Florid	la Statutes.			
SIGNATURE			egistered Agent signature re		ATE	
31011710112	Signature, typed or printed name of registered ag	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	13.	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTOR	S IN 12
12.		ND DIRECTORS	1.1 TITLE	85/679/27/3	☐ Change	☐ Addition
TITLE	P	C Decemb	1.2 NAME	90,11111		
NAME	LOESER, JEFFRY					
STREET ADDRESS	10589 BRENDLE ROAD		1.3 STREET ADDRESS			
CITY-ST-ZIP	MYAKKA CITY FL 34251	Florier	1.4 CITY-ST-ZIP		Change	Addition
TITLE		☐ DELETE	, 2.1 TITLE			
NAME			2.2 NAME			
STREET ADDRESS	s		2.3 STREET ADDRESS			
CITY-ST-ZIP			2.4 CITY-ST-ZIP	<u> </u>	[] Change	Addition
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NAME		☐ DELETE	G			
1			3.2 NAME			
STREET ADDRES		□ pereie		。 111日中央報告第四十四日 11日日		
CITY-ST-ZIP	S Comment	☐ OFFEIE	3.2 NAME		TI Chinds	Addition
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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.