## 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 # P97000021759 (0)

DASER INVESTMENTS, INC.

## FILED Apr 03 1998 8:00am Secretary of State

Principal Place of Business M	lailing Address		T I DOUIDEN ELR FORMY FORER SORIN OOKIN DOUN DOUN DOUN I	
'== * '==: *: *:::: ==:=	2670 NEW BRITTANY B	LVD		
1 00: 10:	Suite 101 Fort Myers FL 33907		DO NOT WRITE IN THE	S SPACE
PORT MIERO PL 3350/	Oni Micho FL 3380/		3. Date Incorporated or Qualified	
			03/10/1997	
2. Principal Place of Business 2a	, Mailing Address		4. FEI Number	Applied For
21			65-0737541	Not Applicable
Suite, Apt #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22 27	City B Coats	<del></del>		Fee Required
City & State 28	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
	Ζφ	Country	R. This corporation owes or has paid the co	
24 25 29		30	Personal Property Tax due June 30.	Yes No
Name and Address of Current Regis	stered Agent	1-01	10. Name and Address of New Registere	d Agent
ROYSTON, ROBERT D		B1 Name		
12670 NEW BRITTANY BLVD		B2 Street Add	iress (P.O. Box Number is Not Acceptable)	
SUITE 101		Sirect Add	reas (F.O. Dox Marrison is Not Neceptable)	
FORT MYERS FL 33907		83		
		84 City		85 Zip Code
		City	F	L B3 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 6	07.1508, Florida <b>Sta</b> tut	es, the above named cor	poration submits this statement for the purpose	of changing its registered
office or registered agent, or both, in the State of Flori agent. I am familiar with, and accept the obligations of	ida. Such change was i if, Section 607.0505, Fil	autnorized by the corpora orida Statutes.	ation's board of directors. I hereby accept the ap	apomiment as registered
SIGNATURE				
Signature, typed or printed name of registered agent and little		E. Registered Agent signature requ		
12. OFFICERS AND DIRE		13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE D	☐ DELETE	1 I TITLE		Change Addition
NAME DASER, WILLIBALD		1 2 NAME		
STREET ADDRESS 7 DORFSTRASSE		13 STREET ADDRESS		
CHY-ST-ZIP SACHRANG, GERMANY 83229	DELETE	14 CITY-SI-ZIP 21 THLE	*	Change Addition
NAME DASER, ELFRIEDE	better	2.2 NAME		C Outride C Manual
STREET ADDRESS 7 DORFSTRASSE		2 3 STREET ADDRESS		
CITY-ST-ZIP SACHRANG, GERMANY 83229		2 4 City-St-ZiP	•	
TITLE	DELETE	31 TITLE		Change Addition
NAME		3.2 NAME		
STREET ADDRESS		3 3 STREET ADDRESS		
CITY-ST-ZIP		3 4. C/TY-ST-ZIP		
TITLE	DELETE	4 1 TITLE		Change Addition
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY - SI - ZIP		
TITLE	DELETE	5 1 7ITLE		Change Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY - ST - ZIP		
TITLE	☐ DELETE	6.1 TITLE		Change Addition
NAME		6 2 NAME		
STREET ADDRESS		63 STREET ADDRESS		
City-St-ZiP		6.4 CITY-ST-ZIP	Caption 110 07/2\(\text{ii}\) Florida Statutos   Further	

14. I hereby certify that the information supplied with this filling 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 13 if change for our attachment with an address.

2-22-1988