## 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 P97000065189 (7)

DRAPER ENTERPRISES. INC.

Principal Place of Business	Mailing Address
123 EAST PARK AVENUE LAKE WALES FL 33853	123 EAST PARK AVENUE LAKE WALES FL 33853
2. Principal Place of Business	2a. Mailing Address

**FILED** Apr 17 1998 8:00am Secretary of State

Principal Place of Business Mailing Address					i isaitaat tis istit estit asit satit satit	40 B1401 11801 LOTTE 4011 1001
123 EAST PARK AVENUE 123 EAST PARK AVENUE LAKE WALES FL 33853 LAKE WALES FL 33853				DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified	31 AGE
					07/29/1997	
2. Principal P	Place of Business	2a. Mailing Address	3		4. FEI Number	Applied For
21		26			59-3460091	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 27			c.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State City & State				Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Cou	intry	8. This corporation owes or has paid the cu	rrent year Intangible
24	25	29	30			X Yes No
<del></del>	g. Name and Address of Curr	ent Registered Agent			10. Name and Address of New Registered	Agent
DR	APER, LORETTA H			81 Name		
123 EAST PARK AVENUE LAKE WALES FL 33853				82 Street Add	ress (P.O. Box Number is Not Acceptable)	
				63		
				84 City		85 Zip Code
				- J	FL	
11, Pursuant	to the provisions of Sections 607.0	502 and 607.1508, Florida	Statutes, the al	oove-named corp	poration submits this statement for the purpose of	of changing its registered
agent. I a	im familiar with, and accept the obl	igations of, Section 607.050	05, Florida Stat	utes.	initial board of directors. Thereby accept the ap-	bountueur as redistered
SIGNATURE						
	Signature, typed or printed name of legistered	·		d Agent signature requi		
12.		AND DIRECTORS  DELET	13.		ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12  ☐ Change ☐ Addition
NAME	DDADED LODETTA U	<u> </u>		1		Change Change
	DRAPER, LORETTA H		1.2 N/			
STREET ADDRESS	706 CARLTON AVENUE			REET ADDRESS		
CITY-ST-ZIP TITLE	LAKE WALES FL 33853	DELET		TY-ST-ZIP		Change Addition
-	D DADED MICHAEL II	ויין טנננו	<b>1</b> **	ľ		Change L. Adomon
NAME	DRAPER, MICHAEL H		2.2 N/			
STREET ADDRESS	706 CARLTON AVENUE LAKE WALES FL 33853			REET ADDRESS		
CITY-ST-ZIP TITLE	LAINE WALES FL 33033	DELET		ITY-ST-ZIP		Change Addition
NAME		Д осис.	3.2 N/	·		CT change CT vocation
STREET ADDRESS			3	REFT ADDRESS		
CITY-ST-ZIP			<b>I</b> .	ITY-ST-ZIP		
TITLE		DELET				Change Addition
NAME			4.2 N			
STREET ADDRESS	1			REET ADDRESS		
CITY-ST-ZIP TITLE		DELET		TY-ST-ZIP	***************************************	Change Addition
NAME		- 50001	5.7 N			- Charge - Filthough
STREET ADDRESS				REET ADDRESS		
· .				•		
CITY-ST-ZIP TITLE		DELÉT		TY-ST-ZiP		Change Addition
NAME		J.CC1	6.2 NA	1		ET AUGUSTA
				l		
STREET ADDRESS				REET ADDRESS		
GUY-SI-7P			<b>■</b> 64€	14-51. AP		

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 12 or Block 13 if changed, or on an attachment with an address.