

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
2000



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jun 02, 2000 8:00 am
Secretary of State

06-02-2000 90001 042 ***150.00

DOCUMENT # P97000066064 (1)

1. Corporation Name

DOLEZAL ENTERPRISES, INCORPORATED

Principal Place of Business

4270 ALOMA AVENUE SUITE 116
WINTER PARK FL 32792

Mailing Address

4270 ALOMA AVENUE SUITE 116
WINTER PARK FL 32792

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/24/1997

4. FEI Number

59-3458582

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

1 Suite, Apt. #, etc.

2 City & State

3 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

9. Name and Address of Current Registered Agent

DOLEZAL, JOANNE J
1044 HOWELL HARBOR DRIVE
CASSELBERRY FL 32707

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME DOLEZAL, ROSEMARY E
STREET ADDRESS 1044 HOWELL HARBOR DRIVE
CITY - ST - ZIP CASSELBERRY FL 32707-5811

TITLE D ☐ DELETE

NAME DOLEZAL, ROBERT
STREET ADDRESS 1044 HOWELL HARBOR DRIVE
CITY - ST - ZIP CASSELBERRY FL 32707-5811

TITLE D ☐ DELETE

NAME DOLEZAL, JOANNE J
STREET ADDRESS 1044 HOWELL HARBOR DRIVE
CITY - ST - ZIP CASSELBERRY FL 32707-5811

TITLE D ☐ DELETE

NAME DOLEZAL, MICHAEL J
STREET ADDRESS 1044 HOWELL HARBOR DRIVE
CITY - ST - ZIP CASSELBERRY FL 32707-5811

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change

☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

☐ Change

☐ Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

☐ Change

☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

☐ Change

☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

☐ Change

☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

☐ Change

☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

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 authorized signatory to this report as required by Chapter 607, Florida Statutes; and that my name appears in

407-657-5400

JOANNE J. DOLEZAL

4/29/2000