

SECOND 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



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P98000066378

1. Corporation Name

MAASER INVESTMENTS, INC.

Principal Place of Business

C/O BLANK-ROME-GOMISKY & MCCAULEY, LLP  
1200 NORTH FEDERAL HIGHWAY SUITE 417  
BOCA RATON FL 33432

Mailing Address

C/O BLANK-ROME-GOMISKY & MCCAULEY, LLP  
1200 NORTH FEDERAL HIGHWAY SUITE 417  
BOCA RATON FL 33432



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/27/1998

4. FEI Number

65-0862866

Applied For  
Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐ \$5.00 May Be  
Added to Fees

8. This corporation owes the current year  
Intangible Personal Property.

☐ Yes ☒ No

2. Principal Place of Business

21 201 N.E. FIRST AVENUE  
Suite, Apt. #, etc.

2a. Mailing Address

26 201 N.E. FIRST AVENUE  
Suite, Apt. #, etc.

City & State

23 Delray Beach, FL.

City & State

28 Delray Beach, FL.

Zip Country

24 33444

Zip Country

29 33444

9. Name and Address of Current Registered Agent

SARAGA, ROBERT S ESQ  
C/O BLANK-ROME-GOMISKY & MCCAULEY, LLP  
1200 NORTH FEDERAL HIGHWAY SUITE 417  
BOCA RATON FL 33432

10. Name and Address of New Registered Agent

81 Name  
BAIDOVIN, SARAGA + LIPSHY, P.A.  
82 Street Address (P.O. Box Number is Not Acceptable)  
201 N.E. FIRST AVENUE  
83  
84 City  
DELRAY BEACH FL 85 Zip Code  
33444

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

*Robert S. Saraga*  
Signature, typed or printed name of registered agent and title if applicable.

ROBERT S. SARAGA, V.P.

(NOTE: Registered Agent signature required when reinstating)

DATE

7/7/99

12. OFFICERS AND DIRECTORS

TITLE PD  
NAME SARAGA, ROBERT S  
STREET ADDRESS C/O 1200 NORTH FEDERAL HIGHWAY #417  
CITY-ST-ZIP BOCA RATON FL 33432

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

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NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P D S  
1.2 NAME SARAGA, Robert S.  
1.3 STREET ADDRESS 201 NE FIRST AVENUE  
1.4 CITY-ST-ZIP Delray Beach, FL. 33444

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

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 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.

SIGNATURE:

*Robert S. Saraga*  
SIGNATURE OF REGISTERED AGENT

7/7/98 SEC-330-0660

0074135

CR2E034 (5/99)

FILED  
Aug 31, 1999 8:00 am  
Secretary of State

08-31-1999 90001 050 \*\*\*550.00