

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 08, 2001 8:00 am
Secretary of State
03-08-2001 90081 049 ***150.00

DOCUMENT # P98000101829

1. Entity Name
DREL (FLORIDA) INC.

Principal Place of Business

%PETRA ROTTOR COAST TO COAST
5051 CASTELLO DR #17
NAPLES FL 34103

Mailing Address

%PETNA ROTTOR COAST TO COAST
5051 CASTELLO DR #17
NAPLES FL 34103

2. Principal Place of Business

C/O COAST-TO-COAST REALTY

Suite, Apt. #, etc.

11232 TAMIAHI TRAIL N.

City & State

NAPLES, FL

Zip

34110-1640

Country

USA

3. Mailing Address

C/O COAST-TO-COAST REALTY

Suite, Apt. #, etc.

11232 TAMIAHI TRAIL N

City & State

NAPLES, FL

Zip

34110-1640

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number **65-0880317**

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

PETRA ROLLER
%COAST TO COAST
5051 CASTELLO DR. #17
NAPLES FL 34103

7. Name and Address of New Registered Agent

Name **PETRA ROLLER**
Street Address (P.O. Box Number is Not Acceptable)
C/O COAST-TO-COAST REALTY
11232 TAMIAHI TRAIL N
City **NAPLES** **FL** Zip Code **34110-1640**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

[Signature]

[Signature] **PETRA ROLLER**

02/09/01

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE **PSD** ☐ Delete
NAME **HAHNE, ERNST A**
STREET ADDRESS **06 ROSENBERGWEG 26**
CITY-ST-ZIP **ALLSCHWIL, SWITZERLAND CH-41-3**

TITLE **VPT** ☐ Delete
NAME **HAHNE, RUTH**
STREET ADDRESS **06 ROSENBERGWEG 26**
CITY-ST-ZIP **ALLSCHWIL, SWITZERLAND CH-41-3**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
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CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]

[Signature] **ERNST HAHNE**

Date

02/09/01

Daytime Phone #

CR2E034 (10/00)