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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **V53396**

1. Corporation Name

DAVID A. BLASER, INC.

Principal	Place	of	Business

13312 DRYSDALE ST.

Mailing Address

19912 DRYSDALE ST.

## **FILED** Feb 27, 1999 8:00 am Secretary of State

02-27-1999 90029 038 \*\*\*150.00



SPRING HILL FL 34609 SPRING HILL FL 34609			DO NOT WRITE IN TH	HIS SPACE
			3. Date Incorporated or Qualifed 07/23/1992	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
David Blaser	26 David 5	laser	59-3132644	Not Applicable
Suite, Apt. #, etc. 2242 Claremont Ln. Spring HIII, FL 34609	Suite, Apt. #,2242 Clare 27 Spring Hill,	mont Ln.	5. Certifcate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be - Added to Fees
Zip Country 24 25		ountry	This corporation owes the current year Personal Property Tax.	Intangible ☐ Yes   ВNo
9. Name and Address of Current	Registered Agent		10. Name and Address of New Registers	ed Agent
DAVID BLASER  18312 BRYSBALE ST. 2242 Claremont Ln.		81 Name		
		82 Street Addre	Street Address (P.O. Box Number is Not Acceptable)	
SPRING-HILL FL 34609 Spring	g HIII, FL 34609	83	the day also seems to the seems	
		84 City	F	85 Zip Code
11. Pursuant to the provisions of Sections 607.0502	and 607,1508, Florida Statutes, the	above-named corpo	ration 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, Noted or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)  DATE							
12.	OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
TITLE	DPT DELETE	1,1 TITLE	Change Addition				
NAME	BLASER, DAVID A. David Blaser	1.2 NAME					
STREET ADDRESS	12312 DRYSDALE-ST. 2242 Claremont Ln.	1.3 STREET ADDRESS					
CITY-ST-ZIP	SPRING HILL FL Spring Hill, FL 34609	1.4 CITY-ST-ZIP					
TITLE	DVS DELETE	2.1 TITLE	☐ Change ☐ Addition				
NAME	BLASER, VICKY	2.2 NAME					
STREET ADDRESS	13312 DRYSDALEST. 2242 CLAREMONT LA	2.3 STREET ADDRESS					
CITY-ST-ZIP	SPRING HILL FL	2. 4 CITY- ST-ZIP					
TITLE	☐ DELETE	3.1 TITLE	· Change				
NAME		3.2 NAME					
STREET ADDRESS		3.3 STREET ADDRESS					
CITY-ST-ZIP		3.4. CITY-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-ST-ZIP					
TITLE	☐ DELETE	5.1 TITLE	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		6.3 STREET ADDRESS					
CITY-ST-ZIP		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 suppliemental 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, with all other like empowered.

SIGNATURE:

(352) 688-2572