


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

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FILED
Jun 10, 2008 8:00 am
Secretary of State

05-14-2008 90020 030 ***150.00

DOCUMENT # F01000004932 1. Entity Name ASSOCIATED GLOBAL SYSTEMS, INC.	
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Principal Place of Business 3333 NEW HYDE PARK ROAD NEW HYDE PARK, NY 11042	Mailing Address 3333 NEW HYDE PARK ROAD NEW HYDE PARK, NY 11042
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66013799



04212008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 13-1873046	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324
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**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Mulvey O'Connell SVF Finance 4/22/08
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCD FREEMAN, NORMAN 211 EAST 70TH STREET NEW YORK, NY 11021
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V TUCCI, JAMES 33 VAL RAY BLVD. CENTRAL SLIP, NY 11722
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V OCCHICONE, MICHAEL 1026 KEARNEY AVENUE 1362 BRONX, NY 10465
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JASON, JAY 100 RED SCHOOLHOUSE ROAD CHESTNUT RIDGE, NY 10977
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Mulvey O'Connell 6/4/08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #