

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000011310

FILED
Apr 05, 2007
Secretary of State

Entity Name: ASSET FINANCIAL SERVICES, LLC

Current Principal Place of Business:

6383 10TH AVENUE N.
SUITE C
LAKE WORTH, FL 33463

New Principal Place of Business:

Current Mailing Address:

6383 10TH AVENUE N.
SUITE C
LAKE WORTH, FL 33463

New Mailing Address:

FEI Number: 34-1980348 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

TEMEL, DAVID
6383 10TH AVENUE N.
SUITE C
LAKE WORTH, FL 33463 US

Name and Address of New Registered Agent:

TEMEL, DAVID MGRM
6383 10TH AVENUE N.
SUITE C
LAKE WORTH, FL 33463 US

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: DAVID TEMEL 04/05/2007

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: TEMEL, DAVID MGR
Address: 6383 10TH AVENUE N
City-St-Zip: LAKE WORTH, FL 33463

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: TEMEL, DAVID MGR
Address: 6383 10TH AVENUE N
City-St-Zip: LAKE WORTH, FL 33463

Title: MEM () Delete
Name: GILISON, ALAN MEM
Address: 6383 10TH AVENUE N
City-St-Zip: LAKE WORTH, FL 33463

Title: MGR (X) Change () Addition
Name: GILISON, ALAN MGR
Address: 6383 10TH AVENUE N
City-St-Zip: LAKE WORTH, FL 33463

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DAVID TEMEL MGRM 04/05/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date