

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
May 01, 2003 8:00 am  
Secretary of State

05-01-2003 90409 023 \*\*\*158.75

0904038 AV

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1. Entity Name  
SASCOM SYSTEMS, INC.

Principal Place of Business

~~8850 SOUTH US 1~~  
~~PORT SAINT LUCIE FL 34952~~

Mailing Address

~~8850 SOUTH US 1~~  
~~PORT SAINT LUCIE FL 34952~~

2. Principal Place of Business

1732 94<sup>TH</sup> DRIVE

3. Mailing Address

1732 94<sup>TH</sup> DRIVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.



CHECK HERE IF MAKING CHANGES

City & State  
VERO BEACH FL

City & State  
VERO BEACH FL

4. FEI Number 65-1074438

Applied For  
Not Applicable

Zip Country  
32966

Zip Country  
32966

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

6. Name and Address of Current Registered Agent

LASASSO, FRANK  
1322 BRIARWOOD DR  
PORT SAINT LUCIE FL 34986

7. Name and Address of New Registered Agent

Name  
SCOTT REDFIELD  
Street Address (P.O. Box Number is Not Acceptable)  
531 10<sup>TH</sup> PLACE  
City  
VERO BEACH FL Zip Code  
32960

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 *Scott Redfield* SCOTT REDFIELD SEC # 4-28-03  
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, 2003 Fee will be \$550.00  
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DP  
NAME LASASSO, FRANK  Delete  
STREET ADDRESS 1322 BRIARWOOD DR  
CITY-ST-ZIP PORT SAINT LUCIE FL 34986

TITLE LASASSO FRANK  Change  Addition  
NAME  
STREET ADDRESS 984 SE SWEET BAY AVE  
CITY-ST-ZIP PORT SAINT LUCIE FL 34986

TITLE DST  
NAME REDFIELD, SCOTT  Delete  
STREET ADDRESS 531 10TH PLACE  
CITY-ST-ZIP VERO BEACH FL 32960

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  Change  Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  Change  Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  Change  Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  Change  Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  Change  Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like information.

SIGNATURE: *Scott Redfield* (SCOTT) REDFIELD SEC 4-28-03 772-530-9277  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)