

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 02, 2007 8:00 am
Secretary of State

02-12-2007 90104 033 ***150.00

DOCUMENT # P03000010309 1. Entity Name ADVERTISING SERVICES GROUP, INC.	
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Principal Place of Business 10922 NW 70TH ST. MIAMI, FL 33178	Mailing Address 10922 NW 70TH ST. MIAMI, FL 33178
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DO NOT WRITE IN THIS SPACE



01122007 No Chg-P CR2E034 (11/05)

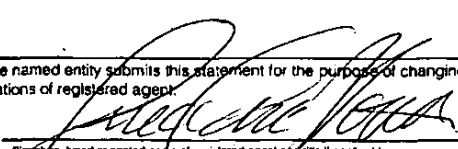
4. FEI Number 61-1420562	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**NOVOA, JUAN C
10922 NW 70TH ST.
MIAMI, FL 33178**

**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  DATE **02/26/07**

Signature, typed or printed name of registered agent and state if applicable. (NOTE: Registered Agent signature required when reinstating)

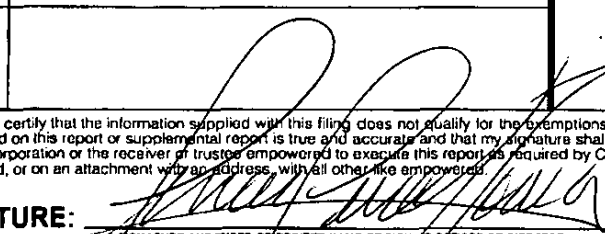
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P NOVOA, JUAN CARLOS 10922 NW 70TH ST. MIAMI, FL 33178
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NOVOA, JUAN CARLOS AVE. FRANCISCO MIRANDA TORRE PROF. LA CALI PISO 8 OF. 8-3, CARACAS, VZ.
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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:  DATE **02/26/07** DAYTIME PHONE # **305-4681885**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR