## 2002 UNIFORM BUSINESS REPORT (UBR)

## Jul 28, 2002 8:00 am Secrétary of State P93000031334 DOCUMENT # 1. Entity Name 07-28-2002 90196 002 \*\*\*558.75 ASH ENGINEERING, INC. Principal Place of Business Mailing Address 5313 JOHNS ROAD 5313 JOHNS ROAD STE. 201 STE. 201 TAMPA FL 33634 **TAMPA FL 33634** US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3179134 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ASH, JANICE S Street Address (P.O. Box Number is Not Acceptable) 216 17TH AVE N ST PETERSBURG FL 33704 City Zip Code FI 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00 Tax filing requirement and elects to do so. (See criteria on back) 10. Election Campaign Financing After September 13, 2002 Fee will be \$750.00 \$5.00 May Be Trust Fund Contribution. Added to Fees Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 DPTS TITLE ☐ Delete TITLE Change ☐ Addition President & Treasurer ASH, JANICE S NAME NAME 216 17TH AVE N STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ST PETERSBURG FL CITY-ST-ZIP TITLE ☐ Delete TITLE V.P.Operations Change **▼** Addition NAME NAME Brian Moschetto STREET ADDRESS STREET ADDRESS 8119 Sudbury Dr CITY-ST-ZIP CITY-ST-7/P New Port Richey, Fl 34668 TITLE -☐ Delete TITLE V.P.Surveying & Mapping Change Kenneth Taylor ★ Addition NAME STREET ADDRESS STREET ADDRESS 13602 Fawn Pidge Blvd CITY-ST-ZIP CITY-ST-ZIP Tampa, Fl 33626 Secretary ☐ Delete TITLE Change ★ Addition NAME NAME Eugene R. Masters STREET ADDRESS 508 Falmouth St STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Temple Terrace, Fl 33617 TITLE. ☐ Delete TITLE Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an appears in Block 11 or Block 12 if SIGNATURE:

FILED