

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 21, 2003 8:00 am
Secretary of State

03-21-2003 90083 018 ***158.75

DOCUMENT # P93000031334	
1. Entity Name ASH ENGINEERING, INC.	

Principal Place of Business 5313 JOHNS ROAD STE. 201 TAMPA FL 33634 US	Mailing Address 5313 JOHNS ROAD STE. 201 TAMPA FL 33634 US
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2. Principal Place of Business	3. Mailing Address
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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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4. FEI Number 59-3179134	Applied For
	Not Applicable

5. Certificate of Status Desired ☒	\$8.75 Additional Fee Required
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☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent	
ASH, JANICE S 216 17TH AVE N ST PETERSBURG FL 33704	

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL	Zip Code

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
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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
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10. OFFICERS AND DIRECTORS	
TITLE	PT ☐ Delete
NAME	ASH, JANICE S
STREET ADDRESS	216 17TH AVE N
CITY-ST-ZIP	ST PETERSBURG FL
TITLE	VPO ☐ Delete
NAME	MOSCHETTO, BRIAN
STREET ADDRESS	8119 SUDBURY DR
CITY-ST-ZIP	PORT RICHEY FL 34668
TITLE	VPSN ☒ Delete
NAME	TAYLOR, KENNETH
STREET ADDRESS	13602 FAWN RIDGE BLVD
CITY-ST-ZIP	TAMPA FL 33626
TITLE	S ☐ Delete
NAME	MASTERS, EUGENE R
STREET ADDRESS	508 FALMOUTH ST
CITY-ST-ZIP	TEMPLE TERRACE FL 33617
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	7316 Grand Blvd. ☒ Change ☐ Addition
NAME	New Port Richie
STREET ADDRESS	FL 34662
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	V. P. Survey & Mapping ☐ Change ☒ Addition
NAME	Robert O. Drake
STREET ADDRESS	5746 Stone Pointe Drive
CITY-ST-ZIP	Sarasota, FL 34233
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 empowered.

SIGNATURE: 	OFFICER REQUIRED	PRESIDENT	2/10/03	813-290-8891
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				

CR2E034 (10/02)