FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Jul 30 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 843201

(5)

ASCO SERVICES, INC.

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Principal Plac 50-60 HANOVER STE 2112 FLORHAM PARI	_	Mailing Address 5060 HANOVER ROAD FLORHAM PARK NJ 07832:	111111111111111111111111111111111111111				
US	· · · · · · · · · · · · · · · · · · ·			3. Date Incorporated or Qualific 05/08/1979	ed 3a. Date of Last Report 03/11/1996		
	Place of Business	26. Mailing Address		4. FEI Number	Applied For		
21 70~ Suite, Apt	60 Hanover Rd	Suite, Apt. #, etc.		22-2243534	Not Applicable \$8.75 Additional		
22 Suite, Apr.		27		5. Certificate of Status Desired	Fee Required		
City & Stat		City & State		6. Election Campaign Financing	g \$5.00 May Be		
	ham rark, NJ	28		Trust Fund Contribution	Added to Fees		
Zip 24 りつC	132 26 USA	Zip 29	Gountry 30	Florida Statutes	for intangible tax under s. 199.032, X Yes No		
	9. Name and Address of Curren	t Registered Agent		10. Name and Address of New	/ Registered Agent		
	CORPORATION SYSTEM		81 Name				
	D S. PINE ISLAND ROAD		82 Street	Address (P.O. Box Number is Not Acce	ptable)		
PLA	NTATION FL 33324		83				
			04 03		85 Zip Code		
			84 City		FL 85 Zip Code		
11. Pursuant office or r	to the provisions of Sections 607.050; registered agent, or both, in the State am familiar with, and accept the obliga	2 and 607.1508, Florida Statuti of Florida. Such change was a utions of, Section 607.0505, Flo	es, the above-named authorized by the cor orida Statutes.	corporation submits this statement for t poration's board of directors. I hereby a	he purpose of changing its registered ccept the appointment as registered		
SIGNATURE							
	Signature, typed or printed name of registered ager		E: Registered Agent signature		DATE		
12.	OFFICERS AND	DELETE	13.	ADDITIONS/CHANGES TO O	FFICERS AND DIRECTORS IN 12 Change Addition		
NAME	GALVIN, WALTER J	_ -	1.2 NAME		,		
STREET ADDRESS	8000 FLORISSANT AVE.	į.	1.3 STREET ADDRESS				
CITY-ST-ZIP	ST LOUIS MO		1.4 CITY - ST - ZIP				
TITLE	PD	☐ DELETE	2.1 TITLE		Change Addition		
NAME	VISIOLI, ARMAND J 50-80 HANOVER ROAD		2.2 NAME				
STREET ADDRESS CITY-ST-ZIP	FLORHAM PARK NJ		2.3 STREET ADDRESS				
TITLE	TD TD	☐ DELETE	2. 4 CITY-ST-ZIP 3.1 TITLE		Change Addition		
NAME	SMITH, RANDY P		3.2 NAME				
STREET ADDRESS	50-60 HANOVER RD		3.3 STREET ADDRESS				
CITY-ST-ZIP	FLORHAM PARK NJ		34 CITY-ST-ZIP				
TITLE	8	DELETE	4.1 TITLE	Christopher 6. wals	Change 🗶 Addition		
NAME	ROONEY, RICHARD P		4. 2 NAME	50.60 Hanover Rd.			
STREET ADDRESS	50-50 HANOVER HOAD FLORHAM PARK NJ		4.3 STREET ADDRESS	Florham Park, NJ C			
CITY-ST-ZIP	AT	DELETE	4.4 CITY-ST-ZIP 5.1 TITLE	F 101 MAM FAFE 1 103 C	Change Addition		
NAME	DELLAQUILA, FRANK		5.2 NAME	l i v	man - contig		
STREET ADDRESS	8000 FLORISSANT AVE		5.3 STREET ADDRESS	· '			
CITY-ST-ZIP	ST LOUIS MO		5.4 CITY - ST - ZIP				
TITLE	D	🔀 DELETE	6.1 TITLE	AS	☐ Change 🔀 Addition		
NAME	BOUCHARD, WAYNE D		6.2 NAME	Smith, H	1 1.00		
STREET ADDRESS	50-60 HANOVER RD		6.3 STREET ADDRESS	8000 W. Florissa	NT AVE.		
CITY-ST-ZIP	FLORHAM PARK NJ		64 CITY-S1-ZIP	St. Louis, MO	63136		

14. I do 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 12 or Block 13 if charged, or on an attachment with an address.

SIGNATURE: (SHE THE VOTE OF SHEET