

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000109214

Entity Name: A SIGNATURE ONLY BAIL BONDS INC.**Current Principal Place of Business:**525 S. ANDREWS AVE
FT. LAUDERDALE, FL 33301**Current Mailing Address:**525 S. ANDREWS AVE
FT. LAUDERDALE, FL 33301**FEI Number:** 20-2239494**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LAING, GERALD W
525 S. ANDREWS AVE
FT. LAUDERDALE, FL 33301 US*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.***SIGNATURE:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	PVD
Name	LAING, GERALD W
Address	525 S. ANDREWS AVE
City-State-Zip:	FT. LAUDERDALE FL 33301

Title	DIRECTOR
Name	VENEZIA, MICHAEL
Address	525 S. ANDREWS AVE
City-State-Zip:	FT. LAUDERDALE FL 33301

Title	DIRECTOR
Name	MALAMUD, ALEXANDRA
Address	525 S. ANDREWS AVE
City-State-Zip:	FT. LAUDERDALE FL 33301

Title	VSD
Name	DURKEE, MARK T
Address	525 S. ANDREWS AVE
City-State-Zip:	FT. LAUDERDALE FL 33301

Title	DIRECTOR
Name	BRIOSIO, ROMMEL
Address	525 S. ANDREWS AVE
City-State-Zip:	FT. LAUDERDALE FL 33301

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: GERALD W LAING**PRESIDENT****08/31/2017**_____
Electronic Signature of Signing Officer/Director Detail_____
Date