

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000024974

**FILED**  
**Jan 11, 2015**  
**Secretary of State**  
**CC6481668250**

**Entity Name:** ASMJ INC

**Current Principal Place of Business:**

339 SW COMMERCE DRIVE  
LAKE CITY, FL 32025

**Current Mailing Address:**

1473 SW 87TH STREET  
GAINESVILLE, FL 32607

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

PATEL, HEMANG B  
1473 SW 87TH STREET  
GAINESVILLE, FL 32607 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 P  
Name PATEL, HEMANG B  
Address 1473 SW 87TH STREET  
City-State-Zip: GAINESVILLE FL 32607

Title VP  
Name PATEL, SONAL  
Address 1473 SW 87TH STREET  
City-State-Zip: GAINESVILLE FL 32607

Title SEC  
Name PATEL, VARSHA H  
Address 6816 SW 86TH TERRACE  
City-State-Zip: GAINESVILLE FL 32608

Title TREA  
Name PATEL, VARSHA  
Address 1473 SW 87TH STREET  
City-State-Zip: GAINESVILLE FL 32607

Title VP  
Name PATEL, RANJAN  
Address 1473 SW 87TH STREET  
City-State-Zip: GAINESVILLE FL 32607

*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:** VARSHA H PATEL

TREA

01/11/2015

Electronic Signature of Signing Officer/Director Detail

Date