

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000060786

**Entity Name:** ASP REALTY CORP

**Current Principal Place of Business:**

40-35 22ND ST.  
LONG ISLAND CITY, NY 11101

**Current Mailing Address:**

40-35 22ND ST.  
LONG ISLAND CITY, NY 11101 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

ARCADIER, MAURICE  
2815 WEST NEW HAVEN AVE.  
SUITE 304  
MELBOURNE, FL 32904 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 D  
Name EDWARDS, NICK  
Address 49 LINKFIELD ST.  
City-State-Zip: REDHILL SURREY UK RH1 6-BS

Title D  
Name DAVIS, DEREK  
Address 40 VICARAGE ROAD  
City-State-Zip: STAINES, MIDDLESSEX ENGLAND  
UK TW18-4YU

Title D  
Name DAVIS, BEN  
Address 22 WHEATSHEAF LANE  
City-State-Zip: STAINES, MIDDLESSEX ENGLAND  
UK TW18-2PE

Title D  
Name WESTON, MARTIN  
Address 22 GLAMFORD AVE.  
City-State-Zip: PORT WASHINGTON NY 11050

Title D  
Name AHLIN, ENGPHEEN  
Address 72-10 112TH ST. APT 1G  
City-State-Zip: FOREST HILLS NY 11375

*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:** NICK EDWARDS

D

04/14/2016

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date