

**2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P21000039794

**FILED**  
**Apr 29, 2022**  
**Secretary of State**  
**5110456282CC**

**Entity Name:** AMERICAN STRATEGIC MANAGEMENT CORPORATION

**Current Principal Place of Business:**

6017 PINE RIDGE RD  
118  
NAPLES, FL 34119

**Current Mailing Address:**

6017 PINE RIDGE RD  
118  
NAPLES, FL 34119

**FEI Number:** 86-3824601

**Certificate of Status Desired:** No

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

LE, DUY  
6017 PINE RIDGE RD  
118  
NAPLES, FL 34119 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            PRES  
Name            LE, DUY  
Address        6017 PINE RIDGE RD #118  
City-State-Zip: NAPLES FL 34119

Title            TREA  
Name            LE, DUY  
Address        6017 PINE RIDGE RD #118  
City-State-Zip: NAPLES FL 34119

Title            SEC  
Name            LE, DUY  
Address        6017 PINE RIDGE RD #118  
City-State-Zip: NAPLES FL 34119

*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:** DUY LE

**PRES**

**04/29/2022**

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

\_\_\_\_\_  
Date