

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 152243

1. Entity Name
ASIG MIAMI, INC.FILED
Mar 27, 2002 8:00 am
Secretary of State

03-27-2002 90019 034 ***150.00

Principal Place of Business

4720 N.W. 20TH STREET
MIAMI FL 33159

Mailing Address

ATTN: TAX/TREASURY DEPT.
1815 GRIFFIN ROAD-#300
DANIA FL 33004-2252
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

201 S. Orange Avenue

Suite, Apt. #, etc.
11003. Mailing Address *ATTN: TAX*

201 S. Orange Avenue

Suite, Apt. #, etc.
1100

City & State

Orlando, FL

City & State

Orlando, FL

Zip

32801

Country

US

Zip

32801

Country

US

4. FEI Number

59-0578335

Applied For

Not Applicable

5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

- CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00**
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	VEDO, WR	
STREET ADDRESS	1815 GRIFFIN ROAD - STE #300	
CITY-ST-ZIP	DANIA FL 33004-2252	
TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	TOWNES, STEPHEN	
STREET ADDRESS	1815 GRIFFIN RD - STE #300	
CITY-ST-ZIP	DANIA FL 33004-2252	
TITLE	SV	<input checked="" type="checkbox"/> Delete
NAME	WATTS, GEORGE	
STREET ADDRESS	1815 GRIFFIN ROAD - STE #300	
CITY-ST-ZIP	DANIA FL 33004-2252	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	GASSETT, JOHN	
STREET ADDRESS	1815 GRIFFIN RD - STE 300	
CITY-ST-ZIP	DANIA FL 33004-2252	
TITLE	CFSV	<input type="checkbox"/> Delete
NAME	HARTMAN, JEFFREY P	
STREET ADDRESS	1815 GRIFFIN RD - STE 300	
CITY-ST-ZIP	DANIA FL 33006-2252	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	GRANGER, KURTIS	
STREET ADDRESS	1815 GRIFFIN RD - #300	
CITY-ST-ZIP	DANIA FL 33006-2252	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P, CEO	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Ryan, Keith P.	
STREET ADDRESS	1825 Lake Roberts Ct.	
CITY-ST-ZIP	Windermere, FL 34786	
TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Goldstein, Joseph I	
STREET ADDRESS	9169 Bdy Hill Blvd.	
CITY-ST-ZIP	Orlando FL 32819	
TITLE	Assistant Treasurer	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Rector, Richard	
STREET ADDRESS	2188 Bent Oak Drive	
CITY-ST-ZIP	Apopka, FL 32712	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Haskins, Elizabeth	
STREET ADDRESS	418 River Drive	
CITY-ST-ZIP	DeBary, FL 32713	
TITLE	CFO, VP, T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	488 Misty Lane	
CITY-ST-ZIP	Winter Park, FL 32713	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Lee, Stephen W.	
STREET ADDRESS	1613 Onondaga	
CITY-ST-ZIP	Geneva FL 32732	

13. I 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 report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)