2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2006 08:00 AM
Secretary of State

DOCUMENT # 525300

1. Entity Name
ASHWOOD, INC.

Principal Place of Business	Mailing Address
1501 E. 10 AVE. HIALEAH, FL 33010	1501 E. 10 AVE. HIALEAH, FL 33010

03302006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1789826
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

LAZARUS, GORDON
1501 E. 10 AVE.
HIALEAH, FL 33010

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

000000524681
05/03/06-80118-022 158.75

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	LAZARUS, RUDOLPH
STREET ADDRESS	1501 E 10 AVE
CITY-ST-ZIP	HIALEAH, FL 33010
TITLE	VPT
NAME	LAZARUS, KIRK
STREET ADDRESS	1501 E 10 AVE
CITY-ST-ZIP	HIALEAH, FL 33010
TITLE	VP
NAME	LAZARUS, GORDON
STREET ADDRESS	1501 E 10 AVE
CITY-ST-ZIP	HIALEAH, FL 33010
TITLE	VP
NAME	LAZARUS, MATTHEW
STREET ADDRESS	1501 E 10 AVE
CITY-ST-ZIP	HIALEAH, FL 33010
TITLE	VPS
NAME	LAZARUS, BRENDA
STREET ADDRESS	1501 E 10 AVE
CITY-ST-ZIP	HIALEAH, FL 33010
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 4/7/06 305-371-9213
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

RUDOLPH LAZARUS, PRESIDENT