


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 23, 2007 08:00 AM
Secretary of State

DOCUMENT # 843201 1. Entity Name ASCO SERVICES, INC.	
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Principal Place of Business 50-60 HANOVER RD STE 2112 FLORHAM PARK, NJ 07932 US	Mailing Address 50-60 HANOVER ROAD FLORHAM PARK, NJ 07932
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01042007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 22-2243534	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324	DO NOT WRITE IN THIS SPACE
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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 _____
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, 2007 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS	
TITLE	V
NAME	GALVIN, WALTER J
STREET ADDRESS	8000 FLORISSANT AVE.
CITY-ST-ZIP	ST LOUIS, MO
TITLE	PD
NAME	VISIOLI, ARMAND J
STREET ADDRESS	50-60 HANOVER ROAD
CITY-ST-ZIP	FLORHAM PARK, NJ
TITLE	TD
NAME	ROWAN, EAMOR
STREET ADDRESS	50-60 HANEVER RD
CITY-ST-ZIP	FLORHAM PARK, NJ 07932
TITLE	S
NAME	WALSH, CHRISTOPHER G
STREET ADDRESS	50-60 HANOVER RD
CITY-ST-ZIP	FLORHAM PARK, NJ
TITLE	AT
NAME	RABE, D.J.
STREET ADDRESS	8000 FLORISSANT AVE
CITY-ST-ZIP	SAINT LOUIS, MO 63141
TITLE	AS
NAME	SMITH, H
STREET ADDRESS	8000 W FLORISSANT AVE
CITY-ST-ZIP	ST LOUIS, MO

**DO NOT WRITE
IN THIS SPACE**

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:  Christopher G. Walsh 1/22/07 973-966-2000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #