FILED
May 05, 2004 8:00 am
Secretary of State

04-05-2004 90387 028 ***150.00

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F00000006898

1. Entity Name
AS PROPERTIES LTD, CO.

bb419466

Principal Place of Business	Mailing Address
1175 NW 125 ST SUITE #412 NORTH MIAMI, FL 33161	6183 MIAMI LAKES DRIVE MIAMI LAKES, FL 33014

03102004 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
6183 Miami Lakes Dr	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Miami Lakes FL	City & State
Zip: 33014 Country: USA	Zip Country

4. FEI Number: 65-0788538 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
SAILSBURY, LYNN 2455 HOLLYWOOD BLVD., #305 HOLLYWOOD, FL 33020	Name: VIVIAN Beck Street Address (P.O. Box Number is Not Acceptable): 6183 MIAMI LAKES DR City: Miami Lakes FL Zip Code: 33014

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: X [signature] 3/31/04
Signature, type or print name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PCD HANSEN, ANNE 2455 HOLLYWOOD BLVD., #301 HOLLYWOOD, FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	HANSEN, ANNE PCD 12555 Biscayne Blvd #421 North Miami, FL 33181	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD PIPPS, CHRISTIE 2455 HOLLYWOOD BLVD., #301 HOLLYWOOD, FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	LYNN Sailsbury VD 12864 Biscayne Blvd #368 North Miami FL 33181	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: X [signature] 3/31/04 305 821 3121
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #