

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 17, 2007 8:00 am
Secretary of State

04-17-2007 90055 009 ***150.00

DOCUMENT # G58619

1. Entity Name
AESP, INC.



Principal Place of Business
**1810 NE 144TH ST
N MIAMI FL 33181**

Mailing Address
**1810 NE 144TH ST
N. MIAMI FL 33181
US**



2. Principal Place of Business - No P.O. Box #
16295 NW 13th Avenue

3. Mailing Address
16295 NW 13th Avenue

Suite, Apt. #, etc.
Suite A

Suite, Apt. #, etc.
Suite A

1st MOORE CR2E034 (10/06)

City & State
MIAMI, FL

City & State
MIAMI, FL

4. FEI Number
59-2327381

Applied For
Not Applicable

Zip
33169

Country
LISA

Zip
33169

Country
LISA

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

6. Name and Address of Current Registered Agent

**BRISKIN, ROMAN
1810 NE 144TH ST
N MIAMI FL 33181**

7. Name and Address of New Registered Agent

Name
BRISKIN, ROMAN

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

16295 N.W. 13th Avenue, Suite A

City
MIAMI

FL

Zip Code
33169

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 *Roman Briskin*

ROMAN BRISKIN

04/04/07

Signature, typed or printed 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, 2007 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**P
STEIN, SLAV
20350 W COUNTRY CLUB DRIVE
N MIAMI FL** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**VPT
BRISKIN, ROMAN
20341 N.E. 30TH AVE.
N MIAMI BCH. FL** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**P
STEIN, SLAV
16295 N.W. 13th Avenue, Suite A
MIAMI, FL 33169** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**VPT
BRISKIN, ROMAN
16295 NW 13th Avenue, Suite A
MIAMI, FL 33169** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

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 exemptions contained in Section 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: *Roman Briskin* **ROMAN BRISKIN** **04/04/07**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #