

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 24, 2005 8:00 am
Secretary of State

01-24-2005 90050 011 ***150.00

DOCUMENT # J36436	
1. Entity Name ASO CORPORATION	

Principal Place of Business 300 SARASOTA CENTER BLVD. SARASOTA, FL 34240	Mailing Address 300 SARASOTA CENTER BLVD. SARASOTA, FL 34240
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50005640



2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

01172005 Chg-P CR2E034 (10/03)

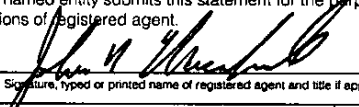
4. FEI Number 59-2738799	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent	
MACASKILL, JOHN D. 1416 CEDAR BAY LANE SARASOTA, FL 34231	

7. Name and Address of New Registered Agent	
Name MACASKILL, JOHN D.	
Street Address (P.O. Box Number is Not Acceptable)	
300 SARASOTA CENTER BLVD.	
City SARASOTA	Zip Code FL 34240

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.

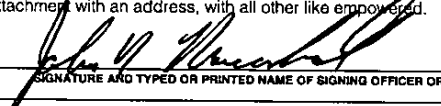
SIGNATURE:  **JOHN D. MACASKILL CEO** **1/17/2005**
(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C KUKI, YASUHIRO 91 TSUKURE KUMAMOTO, JAPAN. ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MACASKILL, JOHN D 1416 CEDER BAY LANE SARASOTA, FL ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KUKI, KOSUKE 91 TSUKURE KUMAMOTO, JAPAN. ☐ 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	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PELLEGRINO, JOHN C. 300 SARASOTA CENTER BLVD. SARASOTA, FL. 34240 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ARCE, LUIS A. 300 SARASOTA CENTER BLVD. SARASOTA, FL. 34240 ☐ 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 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:  **JOHN D. MACASKILL CEO** **1/17/2005** **(941) 379-0300**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone