

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J78078 (9)

1. Corporation Name
AMERICAN ASPHALT ASSOCIATES, INC.



Principal Place of Business
4695 ARNOLD AVE.
NAPLES FL 33942

Mailing Address
4695 ARNOLD AVE.
NAPLES FL 33942

3. Date Incorporated or Qualified
06/15/1987

3a. Date of Last Report
06/14/1995

2. Principal Place of Business

2a. Mailing Address

4. FET Number
59-2819353

Applied For
☒ Not Applicable

21 Suite, Apt. #, etc

26 Suite, Apt. #, etc

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

22 City & State

27 City & State

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

23 Zip Country

28 Zip Country

8. This corporation has liability for intangible tax under s. 190.032,
Florida Statutes ☐ Yes ☐ No

24 25 29 30
9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BRISSON, EUGENE
540 RIDGE DR
NAPLES FL 33963

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of the person who is changing the registered office or agent

Name of Registered Agent Submitting Statement of Change

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	☐ DELETE
P	BRISSON, JUANITA	540 RIDGE DRIVE	NAPLES FL	
ST	BRISSON, EUGENE	540 RIDGE DRIVE	NAPLES FL	
V	BRISSON, BLAINE	940 10TH ST SE	NAPLES FL	
V	BRISSON, ANTHONY	436 PALM RIVER BLVD	NAPLES FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	2. NAME	3. STREET ADDRESS	4. CITY - ST - ZIP	☐ Change ☐ Addition
1. TITLE	2. NAME	3. STREET ADDRESS	4. CITY - ST - ZIP	☐ Change ☐ Addition
5. TITLE	6. NAME	7. STREET ADDRESS	8. CITY - ST - ZIP	☐ Change ☐ Addition
9. TITLE	10. NAME	11. STREET ADDRESS	12. CITY - ST - ZIP	☐ Change ☐ Addition
13. TITLE	14. NAME	15. STREET ADDRESS	16. CITY - ST - ZIP	☐ Change ☐ Addition
17. TITLE	18. NAME	19. STREET ADDRESS	20. CITY - ST - ZIP	☐ Change ☐ Addition
21. TITLE	22. NAME	23. STREET ADDRESS	24. CITY - ST - ZIP	☐ Change ☐ Addition

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***225.00
5-28-96
AEB

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 19.07(3)(a), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13, if changed, or on an attachment with an address.

SIGNATURE: *Juanita Brisson*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/8/96 (94) 643-5697

CR2E034 (12/95)