

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000107730

FILED
Mar 07, 2008
Secretary of State

Entity Name: ASL FLEET SERVICES, L.L.C.

Current Principal Place of Business:

11345 - 53RD STREET
CLEARWATER, FL 33760 US

New Principal Place of Business:

Current Mailing Address:

8200 - 113TH STREET NORTH
SUITE 104
SEMINOLE, FL 33772 US

New Mailing Address:

11345 - 53RD STREET
CLEARWATER, FL 33760 US

FEI Number: 20-5835146

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DENDAR ENTERPRISES, INC.
8200 - 113TH STREET NORTH
SUITE 104
SEMINOLE, FL 33772 US

Name and Address of New Registered Agent:

VECCHIOLI, JOAN M ESQ
911 CHESTNUT STREET
CLEARWATER, FL 33756 US

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.

SIGNATURE: JOAN M. VECCHIOLI, ESQ

03/07/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: DENDAR ENTERPRISES, INC.
Address: 8200 - 113TH STREET NORTH
City-St-Zip: SEMINOLE, FL 33772 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: KEWE UNLIMITED, INC.,
Address: 2401 WEST BAY DRIVE SUITE 124
City-St-Zip: LARGO, FL 33770 US

Title: MGR () Change (X) Addition
Name: MJ&N ENTERPRISES, LL, C
Address: 2401 WEST BAY DRIVE SUITE 124
City-St-Zip: LARGO, FL 33770

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DAVID R. WEBER

MGR

03/07/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date