FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

APPROVED AND FILED

95 MAY -1 PM 3:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT
1995

5-1-95 B-603782

Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L25731 (5)

1. Corporate Name
ASPIRO CORPORATION

Principal Place of Business	Mailing Address
6406 N CAMERON AVE TAMPA FL 33614	6406 N CAMERON AVE TAMPA FL 33614

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	3a. Date of Last Report
10/26/1989	06/06/1994

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	County 25
Zip 29	Country 30

4. FEI Number
59-3022291
☐ Applied For
☐ Not Applicable

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

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
ASPIRO, JOSE R. 6406 N CAMERON AVE TAMPA FL 33614	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 Section(s) 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(s) 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12	
Title	DP	1. Title	☐ Change ☐ Addition
Name	ASPIRO, JOSE R.	2. Name	
Street Address	6406 N CAMERON AVE	3. Street Address	
City-St-Zip	TAMPA FL	4. City-St-Zip	
Title	DST	5. Title	☐ Change ☐ Addition
Name	ASPIRO, BERTHA M.	6. Name	
Street Address	6406 N CAMERON AVE	7. Street Address	
City-St-Zip	TAMPA FL	8. City-St-Zip	
Title	D	9. Title	☐ Change ☐ Addition
Name	RONDON, MARIA E.	10. Name	
Street Address	6406 N CAMERON AVE	11. Street Address	
City-St-Zip	TAMPA FL	12. City-St-Zip	
Title	D	13. Title	☐ Change ☐ Addition
Name	ASPIRO, JORGE L.	14. Name	
Street Address	6406 N CAMERON AVE	15. Street Address	
City-St-Zip	TAMPA FL	16. City-St-Zip	
Title		17. Title	☐ Change ☐ Addition
Name		18. Name	
Street Address		19. Street Address	
City-St-Zip		20. City-St-Zip	
Title		21. Title	☐ Change ☐ Addition
Name		22. Name	
Street Address		23. Street Address	
City-St-Zip		24. City-St-Zip	

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 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this 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 above, or on an attachment with an address.

SIGNATURE: [signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
JOSE R. ASPIRO

4-28-95 (813) 876-7892
Date Daytime Phone #

0296743 CF