

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M88708

**FILED**  
**Jan 09, 2006**  
**Secretary of State**

**Entity Name:** ASSET DEVELOPMENT CORPORATION

**Current Principal Place of Business:**

707 SE 3RD AVE SUITE 400  
FT LAUDERDALE, FL 33316 US

**New Principal Place of Business:**

707 SE 3RD AVE  
SUITE 400  
FT LAUDERDALE, FL 33316 US

**Current Mailing Address:**

707 SE 3RD AVE SUITE 400  
FT LAUDERDALE, FL 33316 US

**New Mailing Address:**

707 SE 3RD AVE  
SUITE 400  
FT LAUDERDALE, FL 33316 US

**FEI Number:** 65-0087651

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DISQUE, PHILIP A  
707 SE 3RD AVENUE  
SUITE 400  
FT LAUDERDALE, FL 33316 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: BACARDI, JOAQUIN E  
Address: 707 SE THIRD AVE, STE 400  
City-St-Zip: FT. LAUDERDALE, FL

Title: DPT ( ) Delete  
Name: DISQUE, PHILIP A  
Address: 707 SE 3RD AVE  
City-St-Zip: FT LAUDERDALE, FL 33316

Title: D (X) Delete  
Name: COLAGIOVANNI, PETER M  
Address: 7440 SW 7TH STREET  
City-St-Zip: PLANTATION, FL 33317

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: COLAGIOVANNI, PETER M  
Address: 7440 SW 7TH STREET  
City-St-Zip: PLANTATION, FL 33317 US

Title: DPT (X) Change ( ) Addition  
Name: DISQUE, PHILIP A  
Address: 707 SE 3RD AVE  
City-St-Zip: FT LAUDERDALE, FL 33316 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PHILIP A DISQUE

P

01/09/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date