

# 2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000011688

FILED  
Oct 31, 2007  
Secretary of State

Entity Name: ASSTI INC.

**Current Principal Place of Business:**

7701 WEST 18 LANE  
HIALEAH, FL 33014

**New Principal Place of Business:**

**Current Mailing Address:**

7701 WEST 18 LANE  
HIALEAH, FL 33014

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

ZERO, LORRAINE  
7701 WEST 18 LANE  
HIALEAH, FL, FL 33014 US

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

ZERO, ANDREW  
7701 WEST 18 LANE  
HIALEAH, FL, FL 33014 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: ANDREW ZERO

10/31/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: ZERO, ANDREW  
Address: 7701 WEST 18 LANE  
City-St-Zip: HIALEAH, FL 33014 US

Title: VP ( ) Delete  
Name: ZERO, BRYAN K  
Address: 7701 WEST 18 LANE  
City-St-Zip: HIALEAH, FL 33014 US

Title: SEC. (X) Delete  
Name: ZERO, LORRAINE  
Address: 7701 WEST 18 LANE  
City-St-Zip: HIALEAH, FL 33014

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

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

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

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

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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANDREW ZERO

P

10/31/2007

Electronic Signature of Signing Officer or Director

Date