2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Aug 14, 2007 8:00 am Secretary of State DOCUMENT # N12879 1. Entity Name 08-14-2007 90008 022 ****61.25 ASPHALT ANGELS, INC. Principal Place of Business Mailing Address C/O DONALD HANCOCK C/O DONALD HANCOCK 12123 KEYLIME BLVD 12123 KEYLIME BLVD WEST PALM BEACH FL 33412 WEST PALM BEACH FL 33412 2. Principal Place of Business - No P O Box # 3. Mailing Address Suite, Apt. #, etc Suite, Apt. #, etc. 2nd MOORE CR2E037 (4/07) Applied For City & State City & State 4. FEI Number 59-2666916 Not Applicable Zip Country , Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HANCOCK, DONALD Street Address (P.O. Box Number is Not Acceptable) 12123 KEYLINE BLVD PALM BEACH GARDENS FL 33412 Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of required agent and title if applicable FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Due By September 5, 2007 Florida Department of State Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. VĎ ☐ Delete TITLE M Change Addition THE WELD, LARRY WEED, LARRY NAME NAME 11921 41ST STREET N 11921 41ST STREET N STREET ADDRESS STREET ADDRESS REYALPALM BEACH FL 33411 ROYAL PALM BEACH FL 33411 CITY-ST-ZIP CITY ST-7IP SD TITLE **Z**Delete TITLE M Change ■ Addition MAHLER, RICHARD 425 SKYLINE DRIVE ATKINS, MICHAEL MAME 16745 W ALAN BLACK BLVD STREET ADDRESS STREET ADDRESS LOXAHATCHEE FL 33470 CAMPOBELLA SC 29322 CH7-ST-7IP CHY-ST ZIP PD TITLE ☐ Delete Change ☐ Addition TITLE HANCOCK, DONALD NAME NAME STREET ADDRESS 12123 KEYLIME BLVD STREET ADDRESS PALM BEACH GARDENS FL 33412 CITY-ST-ZIP CITY-ST-ZIP Detete X) Change THE Addition WELD, DEBI 11921 41 ST STREET ~ NAME MCGUIRE, PAUL NAME STREET ADDRESS STREET ADDRESS 147 LEXINGTON AVE RUYAL PALM BEACH FL 33411 CITY - ST - ZIP CITY-ST-ZIP ROYAL PALM BEACH FL 33411 ☐ Change TITLE ☐ Delete THE Addition HANCOCK, BETTIE NAME MAME 12123 KEYLIME BLVD STREET ADDRESS STREET ADDRESS PALM BEACH GARDENS FL 33412 CITY-ST-ZIP CITY-ST-ZIP CD TITLE ☐ Delete HTL2 ☐ Change X Addition RONALD SANDER 12375 72~D CT NUIRTH TILLERY, DONALD NAME STREET ADDRESS 13530 59TH CT N STREET ADDRESS WEST PARM BEACH FL 33412

FILED

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

WEST PALM BEACH FL 33411

BETTIE HANCOCK 561-845-2900 SIGNATURE