2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Mailing Address

DOCUMENT # N12879

1. Entity Name

ASPHALT ANGELS, INC.

Principal Place of Business

SIGNATURE: 2



FILED Feb 03, 2003 8:00 am Secretary of State 02-03-2003 90087 025 ****70.00

C/O RICHARD 12231 ACAPUL PALM BEACH (US 17. Principal P	co ave Gardens Fl	33410	ASPHALT ANGELS. INC. P.O. BOX 449 LOXAHATCHEE FL 33470 JS L. Mailing Address							
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Suite, Apt.	#, etc.		Suite, Apt. #, etc.		 _	-	CHECK HERE IF N	MAKING CHANGES		
	KEYL	MC BLUD	12123 KEYLI	ME B	LVD	_ <u></u>				
City & State		Carrens El	City & State	ity & State LM BCH GARKUS FL		4. FEI Number 59-2666916		⊢-	oplied For ot Applicable	
Zip Country		Zip	Coun			\$8.7		ditional		
33412 Country			33412	PALM	BCH	5. Certificate of Status Desired Fee Required				
	6. Name	and Address of Current R	egistered Agent	: 32	<u></u>	7. Name and Add	iress of New Regi	stered Agent ≕ ∽		
	V DOMALO	3.			Name					
HANCOCK, DONALD 12123 KEYLINE BLVD					Street Address (P.O. Box Number is Not Acceptable)					
		ENS FL 33412		<u> </u>						
	riori Graig	210 12 00 112		}_	Oibi			To Cod		
					City			FL Zip Cod	e	
		y submits this statement for	he purpose of changing i	ts registered	office or regis	stered agent, or both, in	the State of Florida	a. I am familiar with,	and accept	
the obligat	ions of regist	ered agent.			`. *	•	d d	,		
	V	11 m 1/	26				1/30/0) 7		
SIGNATURE (Signature, typed	or printed name of registered agent an	d title if applicable. (NO	TE: Registered	Agent signature requ	uired when reinstating)	7 39 3	DATE		
										
i	FILE NOW	: FEE IS \$61.25	9. Election Ca	ampaign Fin Contribution		\$5.00 May Be Added to Fees	ľ	Check Payable Department of	L	
10.		OFFICERS AND DIRE	CTORS	11.		ADDITIONS/CHANG	ES TO OFFICERS /	AND DIRECTORS IN	J 10	
TITLE	VD		⊠ Delete	TITLE	VD)		☐ Change	Addition	
NAME	•	_D, BUDDY	, *	NAME	.]	GEORGE K.	HENN			
STREET ADDRESS	14931 N. ([]	
CITY-ST-ZIP	SD SEA	ACH GARDENS FL 33418		CITY-S		OXAHATCHE	E FL 3	3410	i	
TITLE NAME	WELD, LA	DDV	⊠ Delete	TITLE NAME	50	SCHARLENE	F. Doll	☐ Change	Addition (
STREET ADDRESS	11921 415					13046 55TH			1	
CITY-ST-ZIP		LM BEACH FL 33411		CITY-S		OYAL PALM T		334/1		
TITLE	PD	· · · · · · · · · · · · · · · · · · ·	☐ Delete	TITLE	-	IRHEN/D		Change	Addition	
NAME		k, donald		NAME		ONALD TILLE	RY			
STREET ADDRESS		/LIME BLVD			.14-1-5		7 N			
CITY-ST-ZIP		CH GARDENS FL 33412		CITY-S		EST PALM BC		3341/		
TITLE NAME	u Smith, je	RAIN	☐ Delete	TITLE NAME	79	RNON PITT	<i>b</i>	Change	Addition	
STREET ADDRESS	6571 143F			1 "	ADDRESS ///	142 OAKWAY	CIRCLE		1	
CITY-ST-ZIP		CHEE FL 33470		CITY-S		LA BOH GARI		23410	}	
TITLE	TD		□ Delete	TITLE	1			☐ Change	Addition	
NAME	HANCOCK			NAME			5	,	_	
STREET ADDRESS	_	/LIME BLVD		9	ADDRESS					
CITY-ST-ZIP	PALM BEA	CH GARDENS FL 33412	<u> </u>	CITY-S	T-ZIP					
TITLE			☐ Delete	TITLE)		-	Change	☐ Addition	
NAME STREET ADDRESS				NAME STREET	ADDRESS					
CITY-ST-ZIP				CITY-S	li li					
	ertify that the	e information supplied with t	nis filing does not qualify f			Section 119.07(3)(i) Fig.	orida Statutes I fur	ther certify that the id	nformation	
indicated of the cor	on this repor poration or th	t or supplemental report is to be receiver or trustee empow achment with an address, wi	rue and accurate and that rered to execute this repor	my signatur rt as require	e shall have th	ne same legal effect as i	f made under oath	; that I am an officer	or director	