Daytime Phone #

## 2003 FOR PROFIT CORPORATION \_\_UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGN

P00000013550 DOCUMENT # 03 MAY -5 PH 1:53 1. Entity Name TRANSFLO ASP. INC. Principal Place of Business Mailing Address 4010 BOY SCOUT BLVD, SUITE 400 4010 BOY SCOUT BLVD, SUITE 400 **TAMPA FL 33607 TAMPA FL 33607** 3. Mailing Address 2. Principal Place of Business Scout BIVD ocout Blud Suite\_Apt. #, ☐ CHECK HERE IF MAKING CHANGES 4. FEI Number Applied For City & State 59-3642736 Not Applicable Country 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 CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301-2525 City 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. TITLE See Attached TITLE ☐ Delete BERLIN, LESLIE M NAME NAME 010 BOY SCOUT BLVD, #400 STREET ADDRESS STREET ADDRESS TAMPA FL 33607 CITY-ST-7IP CITY-ST-ZIP TITLE 900018948089 cange 05/14/03-01071--001 \*\*\*350.0 ☐ Delete TITLE Addition NAME Jagodžinski, timothy j NAME 4010 BOY SCOUT BLVD, #400 STREET ADDRESS STREET ADDRESS TAMPA FL 336 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition HAWKINS, RUSSELL NAME STREET ADDRESS 4010 BOY SCOUT BLVD #400 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Tampa FL 33607 TITLE Delete TITLE ☐ Change Addition NAME COMER. GARY NAME STREET ADDRESS 20875 CROSSROADS CIR, #100 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WAUKESHA WI 53186 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME SCHLEICHER, WILLIAM T NAME 20875 CROSSROADS CIR, #100 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WAUKESHA WI 53186 CITY-ST-7IP TITLE TITLE ☐ Change ☐ Addition RABBAT, GUY NAME NAME STREET ADDRESS 16134 ROSE AVE STREET ADDRESS CITY-ST-ZIP LOS GATOS CA 95030 CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing 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 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 jequiced by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

ATTACHMENT P00000013550

## Transflo ASP, Inc. Corporate Officers and Directors

Name/Address	Title/City	State	Zip_
Robert Helms 4010 Boy Scout Blvd, #300	CEO & Director Tampa	FL	33607
Schleicher, William 20875 Crossroads Cir, #100	Director Waukesha	WI	53186
Berlin, Leslie M. 4010 Boy Scout Blvd, #300	President & Director Tampa	FL	33607
Page, Larry G. 4010 Boy Scout Blvd, #300	COO & CFO Tampa	FL	33607