

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

DOCUMENT #

P00000093218

1. Entity Name

ASPFreedom, Inc.

FILED

02 MAR -6 PM 3:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

16969 NW 67 Ave

3. Mailing Address

Suite, Apt. #, etc.

201

Suite, Apt. #, etc.

City & State

Miami, Florida

City & State

Zip

33015

Country

USA

Zip

Country

4. FEI Number

02-0534824

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Kenneth Wurtenberg, CPA

Street Address (P.O. Box Number is Not Acceptable)

16969 NW 67 Ave, Suite 201

City

Miami

FL

Zip Code

33015

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FEE IS \$61.25
Initial or Amended UBR

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

PTD

Wurtenberg, Kenneth

16969 NW 67 Ave, Ste 201

Miami, FL 33015

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

V

Rodriguez Jr., Minervino

16969 NW 67 Ave, Ste 201

Miami, FL 33015

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
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 required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Kenneth Wurtenberg

Date

Daytime Phone #

**DO NOT WRITE
IN THIS SPACE**

000005112610--0
-03/18/02--01031--004
****150.00 ****150.00

CR2E037B (12/01)



Kenneth Wurtenberg, CPA

d/b/a

"A Certified Public Accountant"

"Accounting...More than just numbers"

February 26, 2002

Via Certified Mail – Return Receipt Requested

State of Florida
Secretary of State
Attn: Representative Tyrone Scott
409 East Gaines Street
Tallahassee, FL 32399

Re: Document Number: P00000093218
Entity Name: ASPFreedom, Inc.

Dear Representative Tyrone Scott:

Enclosed please find check number 1005 in the amount of \$150.00 along with Uniform Business Report ("UBR") for year 2002.

We previously provided you with a check and UBR for the reinstatement of the above-referenced entity. As stated in our last correspondence, we were unaware that the company had been administratively dissolved as we had paid our fee and filed a UBR.

We ask that you kindly reinstate the above referenced entity without penalties and update your records to show we are current in our filing.

Should you have any questions or require any further information, please do not hesitate to contact me.

Sincerely,



Kenneth Wurtenberg, CPA
Certified Public Accountant

KW/nm
Enclosures