

FILED
Jun 18, 2002 8:00 am
Secretary of State

05-08-2002 90062 014 ***150.00

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000037331

1. Entity Name
A.S.A. PROPERTY MANAGEMENT, INC.

Principal Place of Business
505 AVENUE A, NW, STE 102
WINTER HAVEN FL 33881-4626

Mailing Address
505 AVENUE A, NW, STE 102
WINTER HAVEN FL 33881-4626

00064



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
3373 W. VINE ST

3. Mailing Address
3373 W. VINE ST

Suite, Apt. #, etc.
204

Suite, Apt. #, etc.
204

City & State
KISSIMMEE

City & State
KISSIMMEE

4. FEI Number
A/Almond

Applied For
 Not Applicable

Zip
34741

Country
FL

Zip
34741

Country
FL

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

~~HALL DOUGLASS~~
505 AVENUE A, NW, STE 102
WINTER HAVEN FL 33881-4626

7. Name and Address of New Registered Agent

Name
ARNOLD SANDRA GAJRAJ
Street Address (P.O. Box Number is Not Acceptable)
3373 W. VINE ST SUITE 204
City
KISSIMMEE FL Zip Code
34741

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 *Sandra Gajraj* DATE 5-31-02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input checked="" type="checkbox"/> Delete
D	GAJRAJ, ARNOLD A	505 AVENUE A, NW, STE 102	WINTER HAVEN FL 33881-4626	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
MR	GAJRAJ ARNOLD, A.	3373 W. VINE ST	ORLANDO FL	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *A. Gajraj* DATE 4/19/02 DAYTIME PHONE # 407-933-8525
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/01)