

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000059838

Entity Name: ASCENSION, INC

FILED
Jan 23, 2007
Secretary of State

Current Principal Place of Business:

721 N HWY 29
IMMOKALEE, FL 34142

New Principal Place of Business:

721 N 15TH ST
IMMOKALEE, FL 34142

Current Mailing Address:

721 N HWY 29
IMMOKALEE, FL 34142

New Mailing Address:

721 N 15TH ST
IMMOKALEE, FL 34142

FEI Number: 59-3730965

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAJ, MOHAN
4869 SOUTHERN BLVD
WEST PALM BEACH, FL 33415 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: RAJ, MOHAN
Address: 4869 SOUTHERN BLVD
City-St-Zip: WEST PALM BEACH, FL 33415

Title: VP () Delete
Name: ASHOK, PAUL
Address: 4869 SOUTHERN BLVD
City-St-Zip: WEST PALM BEACH, FL 33415

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: PAUL, ASHOK
Address: 4869 SOUTHERN BLVD
City-St-Zip: WEST PALM BEACH, FL 33415

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MOHANRAJ

PST

01/23/2007

Electronic Signature of Signing Officer or Director

Date