

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jul 04, 2002 8:00 am
Secretary of State

07-04-2002 90547 039 ***150.00

DOCUMENT # P01000082571

1. Entity Name
ASOSC, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
3541 SW 170th AVE

3. Mailing Address
3541 SW 170 AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
MIRAMAR, FLORIDA

City & State
MIRAMAR, FLORIDA

4. FEI Number
65-1129534

Applied For
Not Applicable

Zip
33027

Country
USA

Zip
33027

Country

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

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
ADOLFO IGLESIAS

Street Address (P.O. Box Number is Not Acceptable)
13501 SW 128th St #208

City
MIAMI

FL Zip Code
33186

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

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

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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
PD
NEYSSE CORTES
3541 SW 170th AVE
Miramar, FL 33027

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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CITY - ST - ZIP

**DO NOT WRITE
IN THIS SPACE**

13. 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 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

06-27-2002

Date

954 4319079

Daytime Phone #

*Attachment
to Doc #*
PO1000082571
ASOSC, INC. *118907*
3541 SW 170th AVENUE
MIRAMAR, FLORIDA 33027

JUNE 23, 2002

Division of Corporations
Uniform Business Report Filings
P. O. Box 1500
TALLAHASSEE, FL 32302-1500

To Whom It May Concern: _____

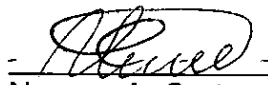
We are submitting the "For Profit Corporation Uniform Business Report" along with the fee of \$150.00.

We request that the penalty fee be waived.

The form got lost in the mail. The registered agent asked us if we had received the form and filed it, we responded what form? We finally got a copy of the form to file. Then we had to wait for funds to arrive to pay the fee from out of country. We have made a good faith effort to comply as soon as we could. Please note that we are not extremely late in filing even with the problems with the mail and the other difficulty.

Thank you

Sincerely,



Neysse A. Cortes, President
ASOSC, INC.