

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Sep 11, 2003 8:00 am
Secretary of State

09-11-2003 90091 005 ***150.00

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DOCUMENT # P02000019522

1. Entity Name

A&S SOURCING CONSULTANTS, INC.



Principal Place of Business

**7161 PROMENADE DR., STE 602 E
BOCA RATON FL 33433**

Mailing Address

**7161 PROMENADE DR., STE 602 E
BOCA RATON FL 33433**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

75-3014425

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

STRATIS, SOPHIA

**7161 PROMENADE DR., STE 602 E
BOCA RATON FL 33433**

Name

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

City

FL

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 \$550.00

After September 10, 2003 Fee will be \$750.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
STRATIGEAS, GEORGE
10 W 65 ST
NEW YORK NY 10023

☐ Delete

TITLE
NAME
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CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
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CITY-ST-ZIP
D
STRATIS, SOPHIA
7161 PROMENADE DR., STE 602 E
BOCA RATON FL 33433

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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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

9/8/03

Daytime Phone #

CR2E034 (4/03)

attachment

A&S SOURCING CONSULTANTS, INC

7161 PROMENADE DR BOCA RATON FL. 33433

PH: 561 750 9061

FAX: 954 346 5166

ASCONSULTINGINC@AOL.COM

September 8, 2003

80147046
#P02000019522

Division of Corporations
Uniform Business Report Filings
PO Box 1500
Tallahassee, Fl 32302-1500

RE: E1# 15-3014425

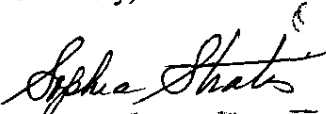
Dear Sir:

Enclosed is the duly executed Uniform Business Report form for our corporation and a check in the amount of \$150.00 for the filing fee.

Inasmuch as this is this first notice we received, we are respectfully requesting that the late fee be waived.

Thank you for your consideration. If you have any questions, please notify us.

Sincerely,


Sophia Stratis