Aug 25, 2003 8:00 am Secretary of State

2003	FOR	PROFIT	CORPORA	TION
JNIFO	RM B	USINESS	S REPORT	(UBR)

P02000063456 **DOCUMENT #** 08-25-2003 90104 008 ***150.00 1. Entity Name 401K ASP, INC. Principal Place of Business Mailing Address 4511 N. HIMES AVE., SUITE 150 4511 N. HIMES AVE., SUITE 150 **TAMPA FL 33614** TAMPA FL 33614 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES 4. FEI Number City & State City & State Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7.-Name and Address of New Registered Agent Name HANEY, R. REID Street Address (P.O. Box Number is Not Acceptable) 101 E. KENNEDY BLVD., #4100 **TAMPA FL 33614** City 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 9. Election Campaign Financing \$5.00 May Be After September 10, 2003 Fee will be \$750.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS PID President - Directur + Director Change TITLE President ☐ Delete TITLE Peter Kirtland Poter Kirtland NAME NAME 9306 Design IV. 9306 Expailin Dr. STREET ADDRESS STREET ADDRESS Tampa FFL 33626 CITY-ST-ZIP CITY-ST-ZIP Tampa IFL 33626 Kice President Vice President - Director VIDS - Change TITLE TITLE Delete James Olsek James olson NAME NAME 240 san Beauto #11 240 San Benito # 11 STREET ADDRESS STREET ADDRESS San Birno, CA 74066 San Bruno, CA 94066 CITY-ST-ZIP CITY-ST-ZIP Michael Gofffried VIDIT Change vice resident + Director _ TITLE TITLE-Addition Delete - -Michael Gotterica NAME NAME 902 S. Fremont Are, #307 500 S. Ermont Ave. # 307 STREET ADDRESS STREET ADDRESS 33606 FL CITY-ST-ZIP CITY-ST-ZIP Tampa, TITLE ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 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:

MAMPEDUIRMELOEL

attachment

401k ASP, Inc.

4511 North Himes Avenue Tampa, FL 33614

August 21, 2003

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

To Whom It May Concern:

401k ASP did not receive the first Uniform Business Report notice. The first notice we received was on August 21, 2003. As a result of this confusion, we are asking that the late fee be waived. We have enclosed a check for the original filing fee amount of \$150.00. If any further action is needed on our end please do not hesitate to contact us. Thank you.

Sincerely,

Mike Gottfried

Vice-President, 401k ASP, Inc.