


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jun 13, 2006 8:00 am**  
**Secretary of State**

06-13-2006 90001 017 \*\*\*150.00

<b>DOCUMENT # P02000125890</b> 1. Entity Name <b>STUART LENDING INCORPORATED</b>					
Principal Place of Business <b>5614 SE SCHOONER OAKS WAY A STUART, FL 34997 US</b>			Mailing Address <b>P.O. BOX 3107 STUART, FL 34995 US</b>		
2. Principal Place of Business <b>798 MAIN ST</b> Suite, Apt. #, etc.			3. Mailing Address  Suite, Apt. #, etc.		
City & State <b>SANTA CLARA CA</b>			City & State  		
Zip <b>34997</b>		Country		4. FEI Number <b>75-3090234</b>	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>KUHARCIK, JOSEPH ESQ 1211 THE PLAZA SINGER ISLAND, FL 33404</b>			7. Name and Address of New Registered Agent  Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> 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 <u>KUHARCIK, JOSEPH ESQ</u> <span style="float: right;">6/4/06</span> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW!!! FEE IS \$550.00</b> <b>Due by September 6, 2006</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees			
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ASCHHEIM, LYDIE <input type="checkbox"/> Delete 5614 SE SCHOONER OAKS WAY STUART, FL 34997		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ASCHHEIM, LYDIE <input type="checkbox"/> Delete 798 MAIN ST SANTA CLARA CA 34997		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.					
<b>SIGNATURE:</b> <u>L. Aschheim</u> <b>L. ASCHHEIM</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			6/4/06 <b>772 349 7347</b> <small>Date Daytime Phone #</small>		

**50021384**



05162006 Chg-P CR2E034 (11/05)

ATTACHMENT

50021384  
#P02000125890

TO: MRS TING CARTER

FROM: STUART LENDING INC

6/4/06

Ref n° P02000125890

Please find enclosed both forms for the  
annual report and the check dated 4/6/06  
as per your letter dated May 19, 2006  
and a telephone conversation with your  
office a few days ago. Your letter n° was:

706A 00035270

Thank you.

L. Aschheim, president  
Stuart Lending Inc.

ATTACHMENT  
50021384  
Division of Corporations

## Annual Report

Please review the filing for accuracy and the fee to file. If you need to make corrections, use your browser 'BACK' button, make the necessary changes and use the 'CONTINUE' button again. The filing information will be updated exactly as you have entered it. Once you have submitted the information, your filing cannot be updated, removed cancelled or refunded.

Document Number	P02000125890
Business Entity Name	STUART LENDING INCORPORATED
FEI Number	753090234
FEI Number Status	
Certificate of Status Desired	No
Election Campaign Financing Trust Fund Contribution	No

### Principal Place of Business

Address 798 MAIN ST  
Suite, Apt. #, etc.  
City, State SANTA CLARA, CA  
Zip Code & Country 34997 US

### Mailing Address

Address 798 MAIN ST  
Suite, Apt. #, etc.  
City, State SANTA CLARA, CA  
Zip Code & Country 34995 US

### Name and Address of Registered Agent

Name (Last, First, Middle, Title) KUHARCIK, JOSEPH, ESQ  
Address 1211 THE PLAZA  
Suite, Apt. #, etc.  
City, State SINGER ISLAND, FL  
Zip Code & Country 33404 US  
Registered Agent Signature JOSEPH KUHARCIK

### Officer/Director Name and Address

Title PD  
Name (Last, First, Middle, Title) ASCHHEIM, LYDIE  
Street Address 798 MAIN ST  
City, State SANTA CLARA, CA  
Zip Code & Country 95050 US

ATTACHMENT 50021384  
#PD2000125890

Title

PD

Officer/Director Signature LYDIE ASCHHEIM

*Lydie Aschheim*

Continue

Start Over

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