

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 26, 2004 8:00 am
Secretary of State

01-26-2004 90004 012 ***150.00

DOCUMENT # P02000128622

1. Entity Name

AMERICA'S SHOPPING NETWORK, INC.



Principal Place of Business

1761 W. HILLSBORO BLVD.
STE 404
DEERFIELD BEACH FL 33442
US

Mailing Address

1761 W. HILLSBORO BLVD.
STE 404
DEERFIELD BEACH FL 33442
US

2. Principal Place of Business

1761 W. Hillsboro Blvd.
Suite, Apt. #, etc.
407

3. Mailing Address

1761 W. Hillsboro Blvd.
Suite, Apt. #, etc.
407

City & State

Deerfield Beach, Florida

Zip
33442

Country

City & State

Deerfield Beach, Florida

Zip

33442

Country

4. FEI Number

81-0584582

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SACCOMANNO, PAULA M
1761 W. HILLSBORO BLVD., SUITE 404
DEERFIELD BEACH FL 33442

7. Name and Address of New Registered Agent

Name

Paula M. Saccomanno

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

1761 W. Hillsboro Blvd. Suite 407

City

Deerfield Beach

FL

Zip Code

33442

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 \$150.00

After May 1, 2004 Fee will be \$550.00

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

TITLE P ☐ Delete
NAME SACCOMANNO, PAULA
STREET ADDRESS 1761 W. HILLSBORO BLVD., STE 404
CITY-ST-ZIP DEERFIELD BEACH FL 33442

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE V ☐ Change ☒ Addition
NAME Swarden, Dennis
STREET ADDRESS 1761 W. Hillsboro Blvd. Suite 407
CITY-ST-ZIP Deerfield Beach, FL. 33442

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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:

Paula M. Saccomanno

Paula M. Saccomanno

1-20-04

954-596-4210

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #