

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000009102

Entity Name: ASBS, INC.

FILED
Apr 21, 2008
Secretary of State

Current Principal Place of Business:

5598 NW 90TH TERR
SUNRISE, FL 33351

New Principal Place of Business:

Current Mailing Address:

5598 NW 90 TERRACE
SUNRISE, FL 33351

New Mailing Address:

500 SE 17TH ST STE 220
FT.LAUDERDALE, FL 33316

FEI Number: 22-3891172

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOLCMAN, ABE I
5598 NW 90TH TERR
SUNRISE, FL 33351 US

Name and Address of New Registered Agent:

YANKWITT, ERIC
500 SE 17TH ST STE 220
FT.LAUDERDALE, FL 33316 US

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: ERIC YANKWITT

04/21/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GOLCMAN, ABE I
Address: 5598 NW 90TH TERR
City-St-Zip: SUNRISE, FL 33351

Title: V () Delete
Name: GOLCMAN, SUSAN H
Address: 5598 NW 90TH TERR
City-St-Zip: SUNRISE, FL 33351

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ABE GOLCMAN

D

04/21/2008

Electronic Signature of Signing Officer or Director

Date