


**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 16, 2008 8:00 am**  
**Secretary of State**

04-16-2008 90036 029 \*\*\*150.00

<b>DOCUMENT # P03000010309</b> 1. Entity Name ADVERTISING SERVICES GROUP, INC.	
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Principal Place of Business 10922 NW 70TH ST. MIAMI, FL 33178	Mailing Address 10922 NW 70TH ST. MIAMI, FL 33178
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**60024896**



03132008 No Chg-P CR2E034 (11/05)

4. FEI Number 61-1420562	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent  NOVOA, JUAN C 10922 NW 70TH ST. MIAMI, FL 33178
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**DO NOT WRITE  
IN THIS SPACE**

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.

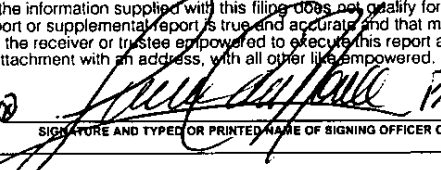
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P NOVOA, JUAN CARLOS 10922 NW 70TH ST. MIAMI, FL 33178
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NOVOA, JUAN CARLOS AVE. FRANCISCO MIRANDA TORRE PROF. LA CALI PISO 8 OF. 8-3, CARACAS, VZ.
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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>  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<b>JUAN C. NOVOA</b> President Date <b>3/14/08</b> (303) 468-1885 <small>Daytime Phone #</small>
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