



2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 07, 2008 08:00 A
Secretary of State

DOCUMENT # P03000091244	
1. Entity Name ASF INVESTMENTS CORP.	

Principal Place of Business 3707 W. GARDENIA AVE. WESTON, FL 33332	Mailing Address 3707 W. GARDENIA AVE. WESTON, FL 33332
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DO NOT WRITE IN THIS SPACE

	
03052008	No Chg-P
CR2E034 (11/05)	
4. FEI Number 56-2388525	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SOSA, FERNANDO
 3707 W. GARDENIA AVE.
 WESTON, FL 33332

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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:  FERNANDO SOSA DATE: 03/05/08

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

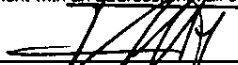
9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

UN0000850543
 03/25/08-80002-017 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SOSA, FERNANDO 3707 W. GARDENIA AVE. WESTON, FL 33332
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SANCHEZ, SERGIO P.O. BOX 526821 MIAMI, FL 33152
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	

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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.

SIGNATURE:  FERNANDO SOSA DATE: 03/05/08 (954) 584-4417

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #