

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000032772

Entity Name: ASG SECURITIES, INC.

FILED
May 09, 2005
Secretary of State

Current Principal Place of Business:

50 NE 26 AVE STE 201
POMPANO BCH, FL 33062

Current Mailing Address:

50 NE 26 AVE STE 201
POMPANO BCH, FL 33062

FEI Number: 65-0801763

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LENZ, CORBETT
50 NE 26 AVE STE 201
POMPANO BCH, FL 33062 US

New Principal Place of Business:

50 NE 26 AVE STE 201
SUITE 201
POMPANO BCH, FL 33062 US

New Mailing Address:

50 NE 26 AVE STE 201
SUITE 201
POMPANO BCH, FL 33062 US

Name and Address of New Registered Agent:

LENZ, CORBETT
50 NE 26 AVE STE 201
SUITE 201
POMPANO BCH, FL 33062 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: _____

Electronic Signature of Registered Agent

05/09/2005

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DS () Delete
Name: LENZ, CORBETT
Address: 50 NE 26 AVE STE 201
City-St-Zip: POMPANO BCH, FL 33062

Title: D () Delete
Name: SCILLIA, MICHAEL
Address: 50 NE 26 AVE STE 201
City-St-Zip: POMPANO BCH, FL 33062

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 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 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: CORBETT LENZ

D

05/09/2005

Electronic Signature of Signing Officer or Director

Date