

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000039027

Entity Name: SMART ASP PRODUCTIONS, INC.

FILED
Apr 08, 2009
Secretary of State

Current Principal Place of Business:

723 IOWA WOODS CR. EAST
ORLANDO, FL 328248635

New Principal Place of Business:

Current Mailing Address:

723 IOWA WOODS CR. EAST
ORLANDO, FL 328248635

New Mailing Address:

FEI Number: 20-0811506

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BEESON, TOM
723 IOWA WOODS CR. EAST
ORLANDO, FL 328248635 US

Name and Address of New Registered Agent:

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

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BEESON, TOM
Address: 723 IOWA WOODS CR. EAST
City-St-Zip: ORLANDO, FL 328248635

Title: D () Delete
Name: SALMERON, MARCIO
Address: 6198 SANDCREST CR.
City-St-Zip: ORLANDO, FL 32819

Title: DST () Delete
Name: RIPOLL, EMERSON
Address: 5930 CASA DEL RAG CR.
City-St-Zip: ORLANDO, FL 32809

Title: D () Delete
Name: BEESON, ELIAMARCIA G
Address: 723 IOWA WOODS CR. EAST
City-St-Zip: ORLANDO, FL 32824

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: SALMERON, MARCIO
Address: 5332 MELINA DR. #4307
City-St-Zip: ORLANDO, FL 32839

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: TOM BEESON

P

04/08/2009

Electronic Signature of Signing Officer or Director

Date