

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000040712

FILED  
Sep 04, 2006  
Secretary of State

Entity Name: ASSIST ENTERPRISES INC.

## Current Principal Place of Business:

5732 NORMANDY BLVD STE 14  
JACKSONVILLE, FL 32205

## New Principal Place of Business:

## Current Mailing Address:

5732 NORMANDY BLVD STE 14  
JACKSONVILLE, FL 32205

## New Mailing Address:

FEI Number: 82-0589062

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MARSHALL, GRAYSON B JR  
5732 NORMANDY BLVD STE 14  
JACKSONVILLE, FL 32205 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

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: PRES ( ) Delete  
Name: MARSHALL, GRAYSON JR  
Address: 5732 NORMANDY BLVD STE 14  
City-St-Zip: JACKSONVILLE, FL 32205

Title: VD ( ) Delete  
Name: MARSHALL, DARLENE  
Address: 5732 NORMANDY BLVD STE 14  
City-St-Zip: JACKSONVILLE, FL 32205

Title: T ( ) Delete  
Name: BELOW, SCOTT  
Address: 5732 NORMANDY BLVD STE 14  
City-St-Zip: JACKSONVILLE, FL 32205

Title: SD ( ) Delete  
Name: SINCLAIR, TAUREAN  
Address: 5732 NORMANDY BLVD STE 14  
City-St-Zip: JACKSONVILLE, FL 32205

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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: GRAYSON MARSHALL, JR.

PRES

09/04/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date