## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000086337

Entity Name: ASPHALT MD INC.

FILED Apr 08, 2007 Secretary of State

| Current Principal Place of Business:                                   |                                 | New Principal Place of E                         | New Principal Place of Business:             |  |
|--|---------------------------------|--|--|--|
| PO BOX 17334<br>PLANTATION, FL 33322                                   | US                              | 151 N NOB HILL RD<br>203<br>PLANTATION, FL 33324 | US   |  |
| Current Mailing Address:   |                                 | New Mailing Address:                             | New Mailing Address:                         |  |
| PO BOX 17334<br>PLANTATION, FL 33322                                   | US                              | PO BOX 17334<br>PLANTATION, FL 33318             | US   |  |
| FEI Number: 65-0511074   | FEI Number Applied For ( )      | FEI Number Not Applicable ( )                    | Certificate of Status Desired ( )            |  |
| Name and Address of Cu   | ırrent Registered Agent:        | Name and Address of No                           | Name and Address of New Registered Agent:    |  |
| COENEN, MARTIN S<br>151 N NOB HILL ROAD<br>203<br>PLANTATION, FL 33324 | US                              |  |  |  |
| The above named entity so in the State of Florida.                     | ubmits this statement for the p | purpose of changing its registered of            | fice or registered agent, or both,           |  |
| SIGNATURE:   |                                 |  |  |  |
| Electronic Signature of Registered Agent                               |                                 | ent  | Date   |  |
| Election Campaign Financing  | Trust Fund Contribution ( ).    |  |  |  |
| OFFICERS AND DIRECTORS:  |                                 | ADDITIONS/CHANGES                                | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |  |
| Title: P ( ) I<br>Name: COENEN, MART<br>Address: PO BOX 17334          | Delete<br>IN                    | Title: ( ) !<br>Name:<br>Address:                | Change ( ) Addition                          |  |

City-St-Zip:

City-St-Zip: PLANTATION, FL 33318

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: MARTIN COENEN P 04/08/2007