

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000088295

FILED
Mar 17, 2009
Secretary of State

Entity Name: A. S. COALITION CORPORATION

Current Principal Place of Business:

5499 SE CELESTIAL CIRCLE
STUART, FL 34997

New Principal Place of Business:

Current Mailing Address:

5499 SE CELESTIAL CIRCLE
STUART, FL 34997

New Mailing Address:

FEI Number: 20-3026542

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SALGADO, AURELIO
5499 SE CELESTIAL CIRCLE
STUART, FL 34997 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: AURELIO SALGADO

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: P () Delete
Name: SALGADO, AURELIO
Address: 5499 SE CELESTIAL CIRCLE
City-St-Zip: STUART, FL 34997

Title: S () Delete
Name: YANEZ, JUANA
Address: 5499 SE CELESTIAL CIRCLE
City-St-Zip: STUART, FL 34997

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 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: AURELIO SALGADO

P

03/17/2009

Electronic Signature of Signing Officer or Director

Date