

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 25, 2006 8:00 am
Secretary of State

04-27-2006 90154 006 ***150.00

DOCUMENT # P05000157812 1. Entity Name ASTRO PARKING, INC.																													
Principal Place of Business 110 N. FEDERAL HIGHWAY UNIT 908 FT LAUDERDALE FL 33301			Mailing Address PO BOX 30459 FT LAUDERDALE FL 33303																										
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.																										
City & State			City & State																										
Zip		Country		4. FEI Number 20-3870048																									
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable																									
6. Name and Address of Current Registered Agent SALAH, GINO 110 N. FEDERAL HIGHWAY UNIT 908 FT LAUDERDALE FL 33301			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City																										
8. 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. I am familiar with, and accept the obligations of registered agent.			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																										
SIGNATURE <i>[Signature]</i> Salah <small>Signature, typed or printed name of registrant agent and fee if applicable</small>			DATE 4-15-06 <small>(NOTE: Registered Agent signature required when re-appointing)</small>																										
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee Will Be \$550.00 Make Check Payable to Florida Department of State																													
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">NAME</td> <td style="width: 20%; text-align: center;">Delete</td> </tr> <tr> <td>NAME</td> <td>SALAH, GINO</td> <td><input type="checkbox"/></td> </tr> <tr> <td>STREET ADDRESS</td> <td>110 N. FEDERAL HIGHWAY, # 908</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>FT LAUDERDALE FL 33301</td> <td></td> </tr> </table>			TITLE	NAME	Delete	NAME	SALAH, GINO	<input type="checkbox"/>	STREET ADDRESS	110 N. FEDERAL HIGHWAY, # 908		CITY - ST - ZIP	FT LAUDERDALE FL 33301		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">NAME</td> <td style="width: 20%; text-align: center;">Change Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td><input type="checkbox"/> <input type="checkbox"/></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> </table>			TITLE	NAME	Change Addition	NAME		<input type="checkbox"/> <input type="checkbox"/>	STREET ADDRESS			CITY - ST - ZIP		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.																													
SIGNATURE: <i>[Signature]</i> GINO SALAH 4-15-06 9573517 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>																													