

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000104609

FILED
Apr 28, 2007
Secretary of State

Entity Name: AGGRESSIVE SITE ACQUISITION & PERMITTING INC.

Current Principal Place of Business:

11186 SPRING HILL DRIVE
SPRING HILL, FL 34609 US

New Principal Place of Business:

Current Mailing Address:

11186 SPRING HILL DRIVE
SPRING HILL, FL 34609 US

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAPONE, MICHAEL
11186 SPRING HILL DR
SPRING HILL, FL 34609 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: P/D () Delete
Name: HESS, MICHELLE
Address: 2278 CANFIELD DR
City-St-Zip: SPRING HILL, FL 34609 US

Title: VP/D () Delete
Name: CAPONE, MICHAEL
Address: 16529 SANDHILL CRANE DR
City-St-Zip: SPRING HILL, FL 34610-901 US

Title: T () Delete
Name: CAPONE, MICHAEL
Address: 16529 SANDHILL CRANE DR
City-St-Zip: SPRING HILL, FL 34610-901 US

Title: S () Delete
Name: HESS, MICHELLE
Address: 2278 CANFIELD DR
City-St-Zip: SPRING HILL, FL 34609 US

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 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: MICHELLE HESS

PRES

04/28/2007

Electronic Signature of Signing Officer or Director

Date