

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000115232

FILED
Apr 19, 2007
Secretary of State

Entity Name: ASI DISTRIBUTORS CENTRAL FLORIDA, INC.

Current Principal Place of Business:

543 BLUE WATER AVENUE
ORANGE CITY, FL 32763

New Principal Place of Business:

Current Mailing Address:

543 BLUE WATER AVENUE
ORANGE CITY, FL 32763

New Mailing Address:

543 BLUE WATER AVENUE
ORANGE CITY, FL 32763 US

FEI Number: 20-5705220

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MUSA, JOHN
543 BLUE WATER AVENUE
ORANGE CITY, FL 32763 US

Name and Address of New Registered Agent:

VALDERRAMA PARTNERS LLC
1870 PROVIDENCE BLVD.
SUITE K
DELTONA, FL 32739 US

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: CARLOS VALDERRAMA

04/19/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BARCELO, LIRIA
Address: 543 BLUE WATER AVENUE
City-St-Zip: ORANGE CITY, FL 32763

Title: VP (X) Delete
Name: MUSA, JOHN
Address: 543 BLUE WATER AVENUE
City-St-Zip: ORANGE CITY, FL 32763

Title: T (X) Delete
Name: MUSA, IRIS
Address: 543 BLUE WATER AVENUE
City-St-Zip: ORANGE CITY, FL 32763

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MUSA, JOHN
Address: 543 BLUE WATER AVENUE
City-St-Zip: ORANGE CITY, FL 32763

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: JOHN MUSA

D

04/19/2007

Electronic Signature of Signing Officer or Director

Date