2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 24, 2009
Secretary of State

DOCUMENT# P07000067753

Entity Name: A.S.P. SPECIALTIES, INC

Current Principal Place of Business:

6301 SOUTH WESTSHORE BLVD
1414
TAMPA, FL 33616 US

New Principal Place of Business:

4800 SOUTH WESTSHORE BLVD
323
TAMPA, FL 33611 US

Current Mailing Address:

6301 SOUTH WESTSHORE BLVD
1414
TAMPA, FL 33616 US

New Mailing Address:

4800 SOUTH WESTSHORE BLVD
323
TAMPA, FL 33611 US

FEI Number: 26-0321442 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RAMIREZ, RUDY M
6301 SOUTH WESTSHORE BLVD
1414
TAMPA, FL 33616 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

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: VP ( ) Delete
Name: RAMIREZ, RUDY M
Address: 6301 SOUTH WESTSHORE BLVD
City-St-Zip: TAMPA, FL 33616 US

Title: VP ( ) Delete
Name: RAMIREZ, RODOLFO M
Address: 10446 COUNTY ROAD 44 LOT 7
City-St-Zip: LEESBURG, FL 34788 US

Title: DIR ( ) Delete
Name: RAMIREZ, RUDY M
Address: 6301 SOUTH WESTSHORE BLVD
City-St-Zip: TAMPA, FL 33616 US

Title: DIR ( ) Delete
Name: RAMIREZ, RODOLFO M
Address: 10446 COUNTY ROAD 44 LOT7
City-St-Zip: LEESBURG, FL 34788 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: RAMIREZ, RUDY M
Address: 6301 SOUTH WESTSHORE BLVD
City-St-Zip: TAMPA, FL 33616 US

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: RUDY M RAMIREZ P 07/24/2009

Electronic Signature of Signing Officer or Director Date