

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000091023

FILED
Apr 07, 2008
Secretary of State

Entity Name: ASSET REAL ESTATE AUCTION SOLUTIONS INC.

Current Principal Place of Business:

2288 COMMERCIAL WAY
SPRING HILL, FL 34606

New Principal Place of Business:

Current Mailing Address:

3467 MONTANO AVE
SPRING HILL, FL 34609

New Mailing Address:

FEI Number: 26-0693264

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARCI, JAMES
2288 COMMERCIAL WAY
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 () Delete
Name: DENOVA, DENISE S
Address: 2521 EAGLE CREST CT - 34 SHARES
City-St-Zip: HOLIDAY, FL 34691

Title: VP () Delete
Name: FRISCIA, CHARLES
Address: 13191 DRYSDALE ST - 33 SHARES
City-St-Zip: SPRING HILL, FL 34609

Title: VP () Delete
Name: HOLLE, BRET
Address: 1915 SAMANTHA LANE - 33 SHARES
City-St-Zip: VALRICO, FL 33594

Title: TR () Delete
Name: FRISCIA, CHARLES
Address: 13191 DRYSDALE ST
City-St-Zip: SPRING HILL, FL 34609

Title: SCTY () Delete
Name: DENOVA, DENISE
Address: 2521 EAGLE CREST CT
City-St-Zip: HOLIDAY, FL 34691

Title: VP (X) Delete
Name: KIMBALL, JEFFREY
Address: 13619 DUNWOODY CT.
City-St-Zip: HUDSON, FL 34667

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:

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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: DENISE S DENOVA

PRES

04/07/2008

Electronic Signature of Signing Officer or Director

Date