

# **2010 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P09000007572

Entity Name: ASAP LEGAL SERVICES, INC.

**FILED**  
**Sep 23, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

13535 NW 10TH STREET  
SUNRISE, FL 33323

**New Principal Place of Business:**

441 SOUTH STATE ROAD 7  
MARGATE, FL 33068

**Current Mailing Address:**

13535 NW 10TH STREET  
SUNRISE, FL 33323

**New Mailing Address:**

441 SOUTH STATE ROAD 7  
MARGATE, FL 33068

FEI Number: 26-4059611

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MARTORELLI, ALICIA  
13535 NW 10TH STREET  
SUNRISE, FL 33323 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: MARTORELLI, BENEDICT  
Address: 13535 NW 10TH STREET  
City-St-Zip: SUNRISE, FL 33323

Title: ST  
Name: MARTORELLI, ALICIA  
Address: 13535 NW 10TH STREET  
City-St-Zip: SUNRISE, FL 33323

Title: VP  
Name: JORDAN, KELLY  
Address: 1038 WEST RIVER DRIVE  
City-St-Zip: MARGATE, FL 33068

Title: VP  
Name: JORDAN, THOMAS  
Address: 1038 WEST RIVER DRIVE  
City-St-Zip: MARGATE, FL 33068

I hereby 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 all other like empowered.

SIGNATURE: ALICIA MARTORELLI

ST

09/23/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date