

**FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00**

**FILED**  
**Feb 07 1997 8:00am**  
**Secretary of State**

**PROFIT CORPORATION ANNUAL REPORT 1997**



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
 Secretary of State  
 DIVISION OF CORPORATIONS

**DOCUMENT # P93000033241 (9)**

1. Corporation Name  
**A.S.E. ENTERPRISES, INC.**



Principal Place of Business  
**452 N.E. 210TH CIRCLE TERR., #101 MIAMI FL 33179**

Mailing Address  
**452 N.E. 210TH CIRCLE TERR., #101 MIAMI FL 33179-1814**

3. Date Incorporated or Qualified **05/07/1993** 3a. Date of Last Report **01/22/1996**

2. Principal Place of Business 2a. Mailing Address  
 21 **1415 MOTTETT ST** 26 **1415 MOTTETT ST**  
 Suite, Apt. #, etc. Suite, Apt. #, etc.

4. FEI Number **65-0513523** Applied For Not Applicable

22 **Hollywood, FL** 27 **Hollywood, FL**  
 City & State City & State

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

23 **33020** 25 Country 29 **33020** 30 Country

6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**

9. Name and Address of Current Registered Agent

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

**EASON, ALAN S**  
**452 N.E. 210TH CIRCLE TERR., #101 MIAMI FL 33179**

10. Name and Address of New Registered Agent  
 81 Name **EASON, ALAN S.**  
 82 Street Address (P.O. Box Number is Not Acceptable) **1415 MOTTETT STREET**  
 83  
 84 City **Hollywood** FL 85 Zip Code **33020**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *[Signature]* DATE **1/30/97**  
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS	
TITLE	<b>DPST</b> <input type="checkbox"/> DELETE
NAME	<b>EASON, ALAN S</b>
STREET ADDRESS	<b>452 NE 210 CIRCLE TERR #101</b>
CITY - ST - ZIP	<b>MIAMI FL</b>
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* **Alan Eason** DATE: **1/30/97** DAYTIME PHONE #: **(954) 920 3111**

CR2E034 (9/96)