

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

APPROVED
AND
FILED

1996 SEP -3 PM 12: 51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **994000053482**
1. Corporation Name

A.S.J. CORPORATION OF Orlando

Principal Place of Business

Mailing Address

**2948 BARRYMORE CT.
ORLANDO, FL. 32835**

3. Date Incorporated or Qualified

3a. Date of Last Report

8/1994

4. FEI Number

Applied for
Not Applicable

69-3258972

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

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

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc

26 Suite, Apt. #, etc

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25 **U.S.A.**

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**Aidi, Judy A.
2948 BARRYMORE CT.
ORLANDO, FL. 32835**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

**2948 BARRYMORE CT.
ORLANDO, FL. 32835**

84 City

FL

85 Zip Code

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 I accept the obligations of, Section 607.0506, Florida Statutes.

SIGNATURE

Judy A. Aidi

8/27/96

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**Pres.
Judy A. Aidi**

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE

Judy A. Aidi

8/27/96

407-296-7451

Date

Typed Name

CR2E034 (3/96)