

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 01, 2007 8:00 am
Secretary of State

05-01-2007 90028 041 ***150.00

DOCUMENT # P94000060195

1. Entity Name
D'ASIGN HOME CENTER, INC.



Principal Place of Business
11500 OVERSEAS HWY
MARATHON, FL 33050

Mailing Address
11500 OVERSEAS HWY
MARATHON, FL 33050

40095434



04302007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3266555	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

COLEMAN, JERRY ESQ
201 FRONT ST. STE 203
KEY WEST, FL 33040

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Jerry Coleman, Esq sm

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/30/07

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	VD
NAME	D'ASCANIO, ANTHONY A
STREET ADDRESS	11500 OVERSEAS HWY
CITY-ST-ZIP	MARATHON, FL 33050

TITLE	PD
NAME	D'ASCANIO, AMEDEO G
STREET ADDRESS	11500 OVERSEAS HWY
CITY-ST-ZIP	MARATHON, FL 33050

TITLE	VD
NAME	D'ASCANIO, FRANCO L
STREET ADDRESS	11500 OVERSEAS HWY
CITY-ST-ZIP	MARATHON, FL 33050

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Anthony D'Ascanio
ANTHONY D'ASCANIO

Date

4/24/07

Daytime Phone #

305-743-7130