2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P94000068212

1. Entity Name

ASTERN INTERNATIONAL, INC.



FILED Jan 23, 2007 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

230 S POWERLINE RD

230 S POWERLINE RD

3

DEERFIELD BEACH, FL 33442

DEERFIELD BEACH, FL 33442



DO	NOT	WRITE	IN	THIS	SP	ACE
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01082007 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For

65-0528244

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ASTERN, LEE 5861 NW 124TH WAY CORAL SPRINGS, FL 33076

DO NOT WRITE IN THIS SPACE

		1			
	named entity submits this statement for the p tions of registered agent.		d office or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and title it			51 SENT required when reinstating)	1-22-07 DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Finance Trust Fund Contribution.	ing 🔲	\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS					
TIFLE NAME STREET ADDRESS CITY-ST-ZIP	P ASTERN, LEE 5861 NW 124TH WAY CORAL SPRINGS, FL 33076				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					U00000599488 01/25/07-80025-022 150.00
TITI C					

DO NOT WRITE 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:

NAME STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Les Astern

PRESIDENT

1-22-07 954-698-004

Date

Daytima Phone #