## 2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE

## DOCUMENT # P94000091233 May 01, 2000 8:00 am Secretary of State ASI HOLDING, INC. 05-01-2000 90428 006 \*\*\*150.00 Mailing Address Principal Place of Business 1377 CLINT MOORE ROAD 1377 CLINT MOORE ROAD BOCA RATON FL 33487-2722 **BOCA RATON FL 33487** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE Applied For City & State 4. FEI Number City & State 65-0571747 Not Applicable Zip Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent RAYMAN, LAWRENCE 1377 CLINT MOORE ROAD **BOCA RATON FL 33487** 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. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State DETIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. PD Change TITLE Delete RAYMAN, LAWRENCE NAME NAME Clint Moore 1377 CLINT MOORE ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **BOCA RATON FL** CITY-ST-ZIP □ Change Delete TITLE TITLE RAYMAN, BIRGITTA NAME NAME STREET ADDRESS 1377 CLINT MOORE ROAD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL** TITLE TITLE ALPERT, ETHAN NAME STREET ADDRESS 1377 CLINT MOORE ROAD STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33487** Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I 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 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 11 or Block 12 if with all other like empowered. changed, or on an attachment with an address