FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # P95000009078 (3)

1. Corporation ASK FI	11101110	. SOLUTIONS,		<i>0,</i> 0, 0	')							
Principal Place of Business Mailing Address										KI BOOK DANK DA		
126 SUNFLOWER CIRCLE 126 SUNFLOW ROYAL PALM BEACH FL 33411 ROYAL PALM					WER CIRCLE I BEACH FL 33411							
								3. Date Incorporated or 02/03/1995	Qualified	3a. Dat	e of Last F	Report
2. Principal Pla	ace of Busin	ess	├ ─┐	2a. Mailing Address				4. FEI Number		400		Applied For
Suite, Apt.	# etc		26	Suite, Apt. #, etc.				65-05	O 0 6	723		Not Applicable
22	m, 6tc.			27				5. Certificate of Status D	esired			5 Additional Required
City & State)			Oity & State			6. Election Campaign Fil	nancing			00 May Be	
23			28	·				Trust Fund Contribution				ed to Fees
24 Zip	Zip Country			Ziρ		Country		8. This corporation has liability for intangible tax under s 199.032,				
9, Name and Address of Curre				29 30 30				Florda Statutes				
					81	Į N	iame	To, Name and Address	OI New	negistered	Agent	
PLUMME	R. CHRIS	TOPHER S						/D.O. Boy Number in No.	7	<u> </u>		
126 SUNFLOWER CIRCLE							rreet Addire	Iress (P.O. Box Number is Not Acceptable)				
ROYAL I	PALM BEA	CH FL 33411							***************************************			
,					84	С	ity				85 Z	'ıp Code
44 6						l	•			FL		-
	ed agent, or in, and acce	both, in the State of pt the obligations of,	f Florida Such cha Section 607.0505	nge was aufnoriz i, Florida Statutes	res, the above-rized by the corp s.	narn orat	ed corpora ion's board	alion submits this statement d of directors. Thereby accep	or the pic it the app	urpose of cha pointment as	anging its registered	registered office d agent. Fam
SIGNATURE _	Skinators, typed	or printed name of regulers	d aneot and libe discould al	ole Ole	Dit. Registered Age:	ا د	out we see I was I	C. F. C. and Market				
12.			S AND DIRECTOR		13.	· sigr	artie legaled	ADDITIONS/CHANGE	S TO OF	DATE FICERS AND	DIRECTO	ORS IN 12
TITLE	D			DELETE	1 1 TITLE						Change	
NAME PLUMMER, CHRISTOPHER				1.2		1.2 NAME						
STREET ADDRESS 126 SUNFLOWER CIRCLE						1.3 STREET ADDRESS						
CITY - ST - ZIP		PALM BEACH FL	. 33411	E SELETE	14 CITY - S	: ZIF	<u> </u>					
TITLE NAME	D PLUMMER, JANET C			DELETE		2 1 TITLE 22 NAME				[Change	
STREET ADDRESS		er, Janet C NFLOWER CIRCL	E									
CITY-ST-ZIP		PALM BEACH FL		141			RESS					
TITLE	HOINE	TADA DENOTITE		DELETE	2.4 CITY S 3.1 TITLE	1 - ZIF	<u></u>			·····	Change	Addition
NAME					3.2 NAME					L	Change	☐ Xoomon
STREET ADDRESS					3.3 STREET	T ADD	IRESS			÷		
CITY-ST-ZIP					3.4 CITY - S	T - ZIF	3					
TITLE				DELETE	4 1 TITLE					[Change	☐ Addition
NAME					4 2 NAME							
STREET ADDRESS					4 3 STREET	ADD	RESS					
CITY · ST · ZiP					4 4 CITY - S	F - Zif	·					
THLE				DELETE	5 1 TITLE						Change	☐ Addition
NAME OTDEET ADDRESS					5.2 NAME							
STREET ADDRESS					5.3 STREET							
CITY-ST-ZIP TITLE				DELETE	5 4 CITY - S	1 - ZIF					7 25	FT 43.00
NAME				C prette	6 1 TIFLE 6 2 NAME					Į.	Change	☐ Addition
STREET ADDRESS					63 STREET	anar	4666					
CITY-ST-ZIP					64 CITY-S							

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

6 4 CITY - S1 - 2IP

SIGNATURE:

CPL CHRISTOPHER SPLOVIMER 4/18/11 (401) 198-3604

CR2E034 (12/95)