

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2004 08:00 AM
Secretary of State

DOCUMENT # P95000031298

1. Entity Name
 G.A.S.I.T. INC.



Principal Place of Business
 10231 SW 107TH ST
 MIAMI, FL 33176

Mailing Address
 10231 SW 107TH ST
 MIAMI, FL 33176



03182004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

| | |
|---|--------------------------------|
| 4. FEI Number 65-0582984 | 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

HEATH, TIMOTHY R
 10231 SW 107TH ST
 MIAMI, FL 33176

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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: *[Signature]* President

Signature of individual name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

04/08/04
 DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

1100000108586
 04/12/04-81009-011 150.00

10. OFFICERS AND DIRECTORS

| | |
|--|--|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | P HEATH, TIMOTHY R 10231 SW 107TH ST MIAMI, FL 33176 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | S HEATH, ISABELLE C 10231 SW 107TH ST MIAMI, FL 33176 |
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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* TIMOTHY R. HEATH
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/08/04 305 293 1801
 DATE Daytime Phone #