

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000055573

FILED
Mar 30, 2009
Secretary of State

Entity Name: ASSOCIATED PARKING SYSTEMS, INC.

Current Principal Place of Business:

18220 WEST DIXIE HWY.
NORTHMIAMI BEACH, FL 33160 US

New Principal Place of Business:

Current Mailing Address:

19201 22 AVENUE
NORTH MIAMI BEACH, FL 33180 US

New Mailing Address:

FEI Number: 65-0647268

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

D'ALESSANDRO, MICHAEL
19201 NE 22 AVENUE
NORTH MIAMI BEACH, FL 33180 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PS () Delete
Name: D'ALESSANDRO, MICHAEL
Address: 19201 NE 22ND AVE.
City-St-Zip: N. MIAMI BCH., FL 33180

Title: VT () Delete
Name: D'ALESSANDRO, YVONNE
Address: 19201 NE 22ND AVE.
City-St-Zip: N. MIAMI BCH., FL 33180

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL D'ALESSANDRO

PRES

03/30/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date