

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000090248

1. Corporation Name

ASPHALT RESEARCH TECHNOLOGY, INC.

Principal Place of Business

14005 NW 186TH STREET
HIALEAH FL 33015
US

Mailing Address

14005 NW 186TH STREET
HIALEAH FL 33015
US

2. Principal Place of Business

21 4649 Ponce de Leon Blvd

2a. Mailing Address

26 SAME

Suite, Apt. #, etc.

22 #303

Suite, Apt. #, etc.

27

City & State

23 Miami, FL

City & State

28

Zip

24 33146

Country

25 USA

Zip

29

Country

30

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/28/1995

4. FEI Number

65-0637353

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐

Yes

☐

No

10. Name and Address of New Registered Agent

81 Name

MARK H. MIRKIN, ESQ.

82 Street Address (P.O. Box Number is Not Acceptable)

MIRKIN & WOLFE, P.A.

83

City

1700 PALM BEACH LAKES BLVD
W. PALM BEACH

84

State

FL

85

Zip Code

33401

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Mark H. Mirkin

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

2/22/99

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

PD
SEAGREN, DAG
90 EDGEWATER 818
CORAL GABLES FL 33133

TITLE ☐ DELETE

V
SEAGREN, LARS
90 EDGEWATER, 818
CORAL GABLES FL 33133

TITLE ☒ DELETE

VD
GARFFER, MICHAEL D
6721 S.W. 76 TERR.
MIAMI FL 33143

TITLE ☒ DELETE

ST
RIOS, GEORGE
1251 S. ALHAMBRA CIRCLE
CORAL GABLES FL

TITLE ☒ DELETE

D
FERNANDEZ, JOSE L
7577 S.W. 81 AVE.
MIAMI FL 33143

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☒ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☒ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 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, with all other like empowered.

SIGNATURE:

DAG SEAGREN
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DAG SEAGREN, PRES. 2/21/99 305-663-3090

Date

Daytime Phone #

CR2E034 (11/98)

UC 1000 1

FILED
Mar 16, 1999 8:00 am
Secretary of State

03-16-1999 90046 017 ***150.00

