2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000090248

Name:

Address: City-St-Zip: LARSEN, CHARLES E

NORCROSS, GA 30093

3890 STEVE REYNOLDS BLVD

Entity Name: ASPHALT RESEARCH TECHNOLOGY INC

FILED Apr 21, 2004 Secretary of State

Littly Nai	HE. AOFHALI	RESEARCH TECHNOLOGI	, INC.		
Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
4649 PON #400 MIAMI, FL	CE DE LEON E 33146 US	BLVD			
Current M	ailing Addres	s:	New Mailing Address	New Mailing Address:	
4649 PONG #400	CE DE LEON E	BLVD			
MIAMI, FL	33146 US				
FEI Number:	65-0637353	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and A				ddress of New Registered Agent:	
WASSERS 1909 TYLE HOLLYWC	of Florida.	NI, P.A. NTHOUSE US	ourpose of changing its registered	office or registered agent, or both,	
Electronic Signature of Registered Agent			ent	 Date	
Election Can	npaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () SEAGREN, DAG 90 EDGEWATE CORAL GABLES	₹ 818	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VD () SEAGREN, LAR 90 EDGEWATE CORAL GABLES	₹, 818	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	D ()	Delete	Title:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

Name:

Address:

City-St-Zip:

SIGNATURE: LARS SEAGREN VP 04/21/2004