2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2006 08:00 AM
Secretary of State

DOCUMENT # P95000092906

Entity Name
AMERICAN SERVICES TECHNOLOGY, INC.

Principal Place of Business
95 WILLARD ST.
STE 103
COCOA, FL 32922 US

Mailing Address
1924 JACQUES DRIVE
VIERA, FL 32940

01182006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3349421
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

HARVIN, MOSES L
1924 JACQUES DR.
VIERA, FL 32940

DO NOT WRITE IN THIS SPACE

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

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

OFFICERS AND DIRECTORS

	PVST
	HARVIN, MOSES L SR.
ADDRESS	1924 JACQUES DR.
ST-ZIP	VIERA, FL 32940
	D
	HARVIN, MOSES L SR.
ADDRESS	1924 JACQUES DR.
ST-ZIP	VIERA, FL 32940
	D
	HARVIN, EMMA L
ADDRESS	1924 JACQUES DR.
ST-ZIP	VIERA, FL 32940
ADDRESS	
ST-ZIP	
ADDRESS	
ST-ZIP	
ADDRESS	
ST-ZIP	

U00000397072
01/30/06-80035-006 150.00

DO NOT WRITE IN THIS SPACE

I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: _____ President Moses Harvin 19 JAN 06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #