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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT

P96000096267

AST Group, Inc

	2 020up, 1,				
Principal Place of Business Mailing Address					
4405 HoneyBrook Circle					
Tampa, FL 33624					
Lamp	u, 12 33024			DO NOT WRITE I	N THIS SPACE
				3. Date Incorporated or Qualified	
A 5	No. of Divisions	Do Mailing Address		11/26/96 4. FEI Number	I January Co.
	Place of Business	2a. Mailing Address 26 P.O. Box 34	0/48/	59-3411911	Applied For
21 1606 Suite, Apt	2 Dawnview Dr.	26 P.U. Box 34 Suite, Apt. #, etc.	10404		Not Applicable \$8.75 Additional
	#, BIC.	27		5. Certificate of Status Desired	Fee Required
City & Stat	le .	City & State	-	6. Election Campaign Financing	\$5.00 May Be
23 Tamp	a, FL 3335.	Z8 Tampa, FL		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid	
3302		29 33694	30	Personal Property Tax due June 3	
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Reg	Istered Agent
Shar	man F. Taylor		81 Name E	ric Coulter	1
64/05 Hanay Brook Cinalo				ddress (P.O. Box Number is Not Acceptable)
4405 noney brook circle				6062 Dawnview Dr.	
ramp	a, FL 33024		63		
			84 City	Tampa	FL 85 Zip Coge 33624
44 5	to the manufacture of Positions 607 0503	and CO7 1E09 Florida Statut		orporation submits this statement for the pu	· -
office or r	registered agent, or both, in the State of	of Florida. Such change was	authorized by the corpo	ration's board of directors. Thereby accept	the appointment as registered
agent. La	im familiar with and accept the obligat	tions of, Section 607.0505, FI	orida Statutes.	״	11111
SIGNATURE	Signature Miccher protect have of registrated again	γ Ε.	-outer		1/98
12.	Signature Process protect Kanso of registered ages OFFICERS AND	DIRECTORS	E Rog stered Agent signature re	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTORS IN 12
THILE	P	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	1 1 TITLE	7.0011010/0101102010 011102	Change Addition
NAME	Sherman F. Taylor		1 2 NAME		
STREET ADDRESS	4405 HoneyBrook C		13 STREET ADDRESS		-
CITY - ST - ZIP	Tampa, FL 33624	ricte	14 CITY - ST- ZIP		
TITLE	V 14mpa, FE 55024	DELETE	21 TITLE	P	Change Addition
NAME	Eric Coulter	_	2 2 NAME	•	
STREET ADDRESS			2.3 STREET ADDRESS		i
CITY-ST-ZIP	16062 Dawnview Dr	`•	2. 4 CITY - ST - ZIP		
TITLE	Tampa, FL 33624	DELETE	31 TOLE	**	XIXIXChange
NAME	Dwayne Josephson		3.2 NAME	V	
STREET ADDRESS	3217 West Alene		3.3 STREET ADDRESS		
CITY-ST-ZIP	Tampa FL 33616		3.4. CITY - ST - ZIP		
TITLE		DELETE	41 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4 3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		<i>I</i>
TITLE		☐ DELETE	51 TITLE		Change Addition
NAME			5 2 NAME		Mn 2/2/1
STREET ADDRESS			5.3 STREET ADDRESS		71/2/1/4
CITY - ST - ZIP			5 4 CITY - \$1 - ZIP		10 / /
TITLE		☐ DELETE	6.1 TITLE "	90000243 -02/25/980100	☐ Change ☐ Addition
NAME			62 NAME	80000243	grzge
STREET ADDRESS			6.3 STREET ADDRESS	-02/25/980100	J1U11
0171/ 01 7/0			CACITY OF 7ID	***150.00	

14. Thereby 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 chapter 507 or an attachment with an address.

SIGNATURE:

E. Coulter

(813) 933-6893

FILED

Feb 24 1998 8:00am

Secretary of State