

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 996000103052 1. Corporation Name ASGSUB 3, Inc.			
Principal Place of Business 105 Westpark Drive Suite 300 Brentwood, TN 37027		Mailing Address same	
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country		3a. Mailing Address Suite, Apt. #, etc. City & State Zip Country	
3. Name and Address of Current Registered Agent Ricardo J. Dopico, Esq. 200 South Biscayne Blvd. Suite 4100 Miami, Florida 33131		4. Name and Address of New Registered Agent CT Corporation System 1200 South Pine Island Rd. Plantation FL 33324	
5. Date Incorporated or Qualified December 23, 1996			
6. FEI Number 62-1725712		Applied For Not Applicable	
7. Certificate of Status Desired ☒		\$8.75 Additional Fee Required	
8. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
9. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. ☐ Yes ☒ No			
10. Signature of Officer or Director Carrie Bryan DATE 1-22-98			
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
12. OFFICERS AND DIRECTORS 1. TITLE NAME STREET ADDRESS CITY, ST, ZIP 2. TITLE NAME STREET ADDRESS CITY, ST, ZIP 3. TITLE NAME STREET ADDRESS CITY, ST, ZIP 4. TITLE NAME STREET ADDRESS CITY, ST, ZIP 5. TITLE NAME STREET ADDRESS CITY, ST, ZIP		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1. TITLE NAME STREET ADDRESS CITY, ST, ZIP 2. TITLE NAME STREET ADDRESS CITY, ST, ZIP 3. TITLE NAME STREET ADDRESS CITY, ST, ZIP 4. TITLE NAME STREET ADDRESS CITY, ST, ZIP 5. TITLE NAME STREET ADDRESS 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 supplied in 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. I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 807, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.			
SIGNATURE: <u>Michael Catalano</u> SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Michael Catalano, Director			

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