

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

FILED
Apr 17 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000080947 (9)

1. Corporation Name
ASTER LANE, INC.



Principal Place of Business
21 SOUTHEAST HARBOR POINT DRIVE
STUART FL 34996

Mailing Address
21 SOUTHEAST HARBOR POINT DRIVE
STUART FL 34996

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
09/12/1997

4. FEI Number
65-0785828

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 or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business
21 SOUTHEAST HARBOR POINT DRIVE
STUART FL 34996

2a. Mailing Address
21 SOUTHEAST HARBOR POINT DRIVE
STUART FL 34996

22. City & State
STUART FL

23. Zip
34996

24. Country
USA

9. Name and Address of Current Registered Agent

MORTELL, EDWIN E
21 SOUTHEAST HARBOR POINT DRIVE
STUART FL 34996

10. Name and Address of New Registered Agent

81. Name
MORTELL, EDWIN III

82. Street Address (P.O. Box Number is Not Acceptable)
1550 SOUTHERN BLVD, STE. 300

83. City
WEST PALM BEACH

84. State
FL

85. Zip Code
33406

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4/14/98

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

PSTD
BARATTA, ROBERT O DR
21 SOUTHEAST HARBOR POINT DRIVE
STUART FL 34996

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

DP
BARATTA, ROBERT O.
21 S.E. HARBOR POINT DRIVE
STUART FL 34996

☒ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

DV
BARATTA, SCOTT R.
21 S.E. HARBOR POINT DRIVE
STUART FL 34996

☐ Change ☒ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

DV
BARATTA, GREGG P.
21 S. E. HARBOR POINT DRIVE
STUART FL 34996

☐ Change ☒ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

DT
MORTELL, MELISSA A.
124 S. E. WELLS ROAD
STUART FL 34996

☐ Change ☒ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

DS
BARATTA, CAROL
21 S. E. HARBOR POINT DRIVE
STUART FL 34996

☐ Change ☒ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☒ Addition

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.

SIGNATURE

Robert O. Baratta, Jr.

Robert O. Baratta, Jr.

4/14/98

5/11/98

CR2E034 (10/97)