

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2005 8:00 am
Secretary of State

04-28-2005 90199 040 ***150.00

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04192005 Chg-P CR2E034 (10/03)

DOCUMENT # P98000037656 1. Entity Name A.S.A ADVERTISING, INC.					
Principal Place of Business 2880 WEST OAKLAND PARK BLVD. SUITE 114 FORT LAUDERDALE, FL 33311			Mailing Address 2880 WEST OAKLAND PARK BLVD. SUITE 114 FORT LAUDERDALE, FL 33311		
2. Principal Place of Business 2632 HOLLYWOOD BLVD Suite, Apt. #, etc. # 115		3. Mailing Address 2632 HOLLYWOOD BLVD Suite, Apt. #, etc. # 105			
City & State HOLLYWOOD FL Zip 33020 Country USA		City & State HOLLYWOOD FL Zip 33020 Country USA		4. FEI Number 65-0827159	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent HARTSFIELD, ANGELA K 2880 W. OAKLAND PARK BLVD #114 FORT LAUDERDALE, FL 33311			7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) 2632 HOLLYWOOD BLVD #105 City HOLLYWOOD FL Zip Code 33020		
8. 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HARTSFIELD, ANGELA K 2880 W OAKLAND PK BLVD #114 FORT LAUDERDALE, FL 33311		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2632 HOLLYWOOD BLVD #105 HOLLYWOOD FL 33020	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TSD HARTSFIELD, DENNIS W 2880 W OAKLAND PK BLVD #114 FORT LAUDERDALE, FL 33311		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2632 HOLLYWOOD BLVD #105 HOLLYWOOD FL 33020	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 Angela K Hartsfield Pres 4/26/05 9549237081 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					