

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000059225

1. Entity Name

ASARO'S CONSTRUCTION GROUP, INC.

Principal Place of Business

1946 1/2 3 AVENUE N
SAINT PETERSBURG FL 33713

Mailing Address

2800 4TH STREET NORTH
PMB 118
ST. PETERSBURG FL 33704

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-3523392

Applied For

Not Applicable

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

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ASARO, MICHAEL T
1946 1/2 3 AVENUE N
SAINT PETERSBURG FL 33713

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete
NAME ASARO, MICHAEL T
STREET ADDRESS 1946 1/2 3 AVENUE N
CITY-ST-ZIP SAINT PETERSBURG FL 33713

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE P ☐ Delete
NAME ASARO, JEANNE M
STREET ADDRESS 1946 1/2 3 AVE N, STE 118
CITY-ST-ZIP ST PETERSBURG FL 33713

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 1946 1/2 3 AVE, N
CITY-ST-ZIP St. Petersburg, FL 33713

TITLE V ☐ Delete
NAME ASARO, TIMOTHY D
STREET ADDRESS 10600 4 STREET N, APT. 1116
CITY-ST-ZIP SAINT PETERSBURG FL 33716

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 3655 66 WAY N
CITY-ST-ZIP St. Petersburg FL 33710

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Jeanne Asaro Jeanne Asaro

4/11/01 7278946071

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)