

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000092866

1. Corporation Name

ASHA'S STUDIO - ART AND FRAME, INC.

Principal Place of Business

5331 LAKE LE CLARE ROAD
LUTZ FL 33549

Mailing Address

5331 LAKE LE CLARE ROAD
LUTZ FL 33549

FILED
May 04, 1999 8:00 am
Secretary of State

05-04-1999 90008 042 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/30/1998

4. FEI Number

59 3540470

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 the current year Intangible
Personal Property Tax.

☐ Yes ☒ No

2. Principal Place of Business

21 14817 N. FLORIDA AVE

2a. Mailing Address

26 Suite, Apt. #, etc.

22 City & State

23 TAMPA, FL

24 Zip 33613 25 Country USA

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

CROSBY, DONALD H
5331 LAKE LE CLARE ROAD
LUTZ FL 33549

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME CROSBY, DONALD H
STREET ADDRESS 5331 LAKE LE CLARE ROAD
CITY-ST-ZIP LUTZ FL 33549

TITLE D ☐ DELETE

NAME CROSBY, DONALD H
STREET ADDRESS 5331 LAKE LE CLARE ROAD
CITY-ST-ZIP LUTZ FL 33549

TITLE D ☐ DELETE

NAME KAAT, ASIA E
STREET ADDRESS 11041 SPRINGRIDGE DR
CITY-ST-ZIP TAMPA FL 33624

TITLE D ☐ DELETE

NAME KAAT, DUANE A
STREET ADDRESS 11041 SPRINGRIDGE DR
CITY-ST-ZIP TAMPA FL 33624

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

P/D

CROSBY, DONALD H
5331 LAKE LE CLARE ROAD
LUTZ FL 33549

S/D

CROSBY, ANITA K
5331 LAKE LE CLARE ROAD
LUTZ FL 33549

D/V

KAAT, ASIA E
11041 SPRINGRIDGE DR
TAMPA FL 33624

T/D

KAAT, DUANE A
11041 SPRINGRIDGE DR
TAMPA FL 33624

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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/99 (727) 573-4656

CR2E034 (11/98)