## **2001 UNIFORM BUSINESS REPORT (UBR)**

SIGNATURE:

## FILED Apr 24, 2001 8:00 am Secretary of State DOCUMENT # P99000017032 D'ASTE SERVICES, INC. 04-24-2001 90300 020 \*\*\*150.00 Principal Place of Business Mailing Address 7881 WILTON CRESCENT CIR. 7881 WILTON CRESCENT CIR. UNIVERSITY PARK FL 34201 UNIVERSITY PARK FL 34201 747798 2. Principal Place of Business 3. Mailing Address LITTLE SWAMP STUDIO'S & THE SWAMP STUDIOS+ Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 05 4. FEI Number Applied For 65-0903383 BRADENTOA Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired MANATEE MAWATEE Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent (AROL AWNA D'ASTE, CAROL ANNA 7881 WILTON CRESCENT CIR. UNIVERSITY PARK FL 34201 8. The above named entity subgrits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible. FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) ..... Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. CR2E034 (10/00) TITLE Delete. TITLE Change Change ☐ Addition D'ASTE CAROL AWNA D'ASTE, CAROL ANNA NAME NAME 1105 124 STW 7881 WILTON CRESCENT CIR. STREET ADDRESS STREET ADDRESS BRADENTON FL, CITY-ST-ZIP CITY-ST-ZIP UNIVERSITY PARK FL 34201 ☐ Delete TITLE ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE ☐ Change NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change Delete TITLE Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP; 12 TITLETO Change NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 aadress, with all other like empowered. AROL ANNA DASTA