

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 26, 2005 08:00 AM
Secretary of State

DOCUMENT # P99000092656

1. Entity Name
A.S.L.M., INC.



Principal Place of Business
10111 FOREST HILL BLVD., STE. 100
WEST PALM BEACH, FL 33414

Mailing Address
10111 FOREST HILL BLVD., STE. 100
WEST PALM BEACH, FL 33414



07262005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0961063

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

MARULL, ELIZABETH
10111 FOREST HILL BLVD STE 100
WEST PALM BEACH, FL 33414

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IN THIS SPACE**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	MARULL, ELIZABETH
STREET ADDRESS	10111 FOREST HILL BLVD STE 100
CITY-ST-ZIP	WEST PALM BEACH, FL 33414
TITLE	VS
NAME	MARULL, ARMANDO
STREET ADDRESS	10111 FOREST HILL BLVD
CITY-ST-ZIP	WEST PALM BEACH, FL 33414
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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08/26/05-80005-003 158.75

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IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Elizabeth Marull / ELIZABETH MARULL (Pres.) 8/19/05 (561) 753-8366 Ext. 110

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #