FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 MAY -1 AM 7:10
SECRE... STATE
TALLAHASSEE, FLORIDA

DOCUMENT # V64824

1. Corporation Name

ASD Design Serivce, Inc,

Principal Place of Business	Mailing Address
4505 NW 6 Avenue Pompano Bch FL	755 NW 73 Terrace Ocala FL 34482-8222

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: 21 4505 NW 6 Avenue	2a. Mailing Address: 26 755 NW 73 Terrace
Suite Apt # etc 22	Suite Apt # etc 27
City & State 23 Pompano Beach FL	City & State 28 Ocala FL
Zip 24 33064 / Country 25 USA	Zip 29 34482-8222 / Country 30 USA

3. Date Incorporated or Qualified: 1/1/93
3a. Date of Last Report: Unknown (1994)
4. FEI Number: 55-0363746 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired [X] $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes [X] Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name: Denise Theriot
82 Street Address (P.O. Box Number is Not Acceptable): 755 NW 73 Terrace
83 Ocala FL 34482-8222
84 City: Ocala FL FL 85 Zip Code 34482

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] 4-28-95

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY ST ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

	Title	Name	Street Address	City St Zip	Change / Addition
1	President	Denise Theriot	755 NW 73 Terrace	Ocala FL 34482-8222	[X] Change ☐ Addition
2					☐ Change ☐ Addition
3					☐ Change ☐ Addition
4					☐ Change ☐ Addition
5					☐ Change ☐ Addition
6					☐ Change ☐ Addition

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****208.75 ****208.75

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: [signature] Denise Theriot 4-28-95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date