2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000006243

Entity Name: A.SUR NET, INC.

FILED Jul 10, 2008 Secretary of State

Littly Nan	IE. A.SOR NE	. I , IINC.					
Current Principal Place of Business:				New Princ	New Principal Place of Business:		
	ST DIXIE HIGH' AMI BEACH, F		US				
Current Mailing Address:				New Mailir	New Mailing Address:		
	ST DIXIE HIGH' AMI BEACH, F		US				
FEI Number:	65-1061048	FEI Numbe	r Applied For()	FEI Number Not Appli	cable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:							
UNITED CORPORATE SERVICES, INC. 9200 SOUTH DADELAND BLVD, SUITE 508 MIAMI, FL 33156 US							
The above in the State		ubmits this	statement for the p	urpose of changing it	s register	ed office or registered agent, or both,	
SIGNATUR	RE:						
Electronic Signature of Registered Agent				nt		Date	
	e with s. 607.193	. , . ,	•	receive the prior notice	э.		
OFFICERS AND DIRECTORS:				ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	CEO () I PADDICK, BREN 15950 WEST DI N. MIAMI BEACH	XIE HGWY		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	PRES () I SCOTT, PAUL 15950 WEST DI N. MIAMI BEACH			Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	EVP () I COLLINS, PETE 15950 WEST DI N. MIAMI BEACH	XIE HWY		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () I CARTWRIGHT, I 15950 WEST DI N MIAMI BEACH	XIE HWY		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title:	SEC ()I	Delete		Title:	SEC	(X) Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

LAGERGREN, KRISTIN

15950 WEST DIXIE HIGHWAY

NORTH MIAMI BEACH, FL 33162

SIGNATURE: KRISTIN LAGERGREN SEC 07/10/2008

DITRAGLIA, KRISTIN

15950 WEST DIXIE HIGHWAY

NORTH MIAMI BEACH, FL 33162

Name:

Address:

City-St-Zip: