

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000005341

Entity Name: ASIWORKS, INC.

FILED
Jan 21, 2011
Secretary of State

Current Principal Place of Business:

7101 WISCONSIN AVENUE
SUITE 1400
BETHESDA, MD 20814 US

New Principal Place of Business:

Current Mailing Address:

7101 WISCONSIN AVENUE
SUITE 1400
BETHESDA, MD 20814 US

New Mailing Address:

FEI Number: 52-2052647 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WALLACE, RICKY B
10512 INNISBROOK DRIVE
JACKSONVILLE, FL 32222 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: ABRAMOWITZ, ELIZABETH A
Address: 7101 WISCONSIN AVENUE SUITE 1400
City-St-Zip: BETHESDA, MD 20814

Title: VP
Name: DORTCH, HELEN B
Address: 7101 WISCONSIN AVENUE, SUITE 1400
City-St-Zip: BETHESDA, MD 20814

Title: STC
Name: ABRAMOWITZ, MICHAEL E
Address: 7101 WISCONSIN AVENUE SUITE 1400
City-St-Zip: BETHESDA, MD 20814

Title: D
Name: THOMAS, DORIS
Address: 7101 WISCONSIN AVENUE SUITE 1400
City-St-Zip: BETHESDA, MD 20814

Title: D
Name: WALKER, SHERWOOD
Address: 7101 WISCONSIN AVENUE SUITE 1400
City-St-Zip: BETHESDA, MD 20814

Title: S
Name: HICKS, LAWANDRA
Address: 7101 WISCONSIN AVENUE SUITE 1400
City-St-Zip: BETHESDA, MD 20814

I hereby 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 all other like empowered.

SIGNATURE: ELIZABETH A. ABRAMOWITZ

PRES

01/21/2011

Electronic Signature of Signing Officer or Director

Date