

2012 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F04000005377

FILED
Feb 23, 2012
Secretary of State

Entity Name: PETER BASSO ASSOCIATES, INC.

Current Principal Place of Business:

5145 LIVERNOIS RD.
SUITE 100
TROY, MI 48098 US

New Principal Place of Business:

Current Mailing Address:

5145 LIVERNOIS RD.
SUITE 100
TROY, MI 48098 US

New Mailing Address:

FEI Number: 38-2924399 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

BUSINESS FILINGS INC.
515 E. PARK AVENUE
TALLAHASSEE, FL 32301 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: CHMN
Name: BASSO, PETER J
Address: 5145 LIVERNOIS STE. 100
City-St-Zip: TROY, MI 48098

Title: VCHM
Name: WANG, TAO LIN(JASON)
Address: 5145 LIVERNOIS RD. STE. 100
City-St-Zip: TROY, MI 48098

Title: PRES
Name: ENGLEHART, DANIEL J
Address: 5145 LIVERNOIS RD., STE. 100
City-St-Zip: TROY, MI 48098

Title: SVP
Name: SCZOMAK, DENNIS P
Address: 5145 LIVERNOIS RD., STE. 100
City-St-Zip: TROY, MI 48098

Title: MR.
Name: COOPER, ROBERT M
Address: 2440 WEST MISSION LANE, STE. 9
City-St-Zip: PHOENIX, AZ 85021

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: DENNIS SCZOMAK

SVP

02/23/2012

Electronic Signature of Signing Officer or Director

Date