

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000001715

FILED
Apr 28, 2008
Secretary of State

Entity Name: VISIBLE ASSETS, INC.

Current Principal Place of Business:

9100 SOUTH DADELAND BLVD
SUITE 106
MIAMI, FL 33156

New Principal Place of Business:

Current Mailing Address:

9100 SOUTH DADELAND BLVD
SUITE 106
MIAMI, FL 33156

New Mailing Address:

FEI Number: 20-1342034 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PIERCE, JAY
9100 SOUTH DADELAND BLVD.
SUITE 106
MIAMI, FL 33156 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: STEVENS, JOHN
Address: 195 BUNKER HILL AVENUE
City-St-Zip: STRATHAM, NH 03885

Title: PD () Delete
Name: PIERCE, JAY
Address: 9100 SOUTH DADELAND BLVD, SUITE 106
City-St-Zip: MIAMI, FL 33156

Title: D () Delete
Name: HURST, JEFFREY
Address: 950 WINTER STREET, SUITE 4100
City-St-Zip: WALTHAM, MA 02451

Title: D () Delete
Name: LOOP, FLOYD
Address: 9500 EUCLID AVENUE
City-St-Zip: CLEVELAND, OH 44195

Title: D () Delete
Name: KIM, MICHAEL
Address: 222 VISTA MARINA
City-St-Zip: SAN CLEMENTE, CA 92672

Title: D () Delete
Name: PHILIPPE, DULREYRIE
Address: 227 NORTH MURRAY AVENUE
City-St-Zip: RIDGEWOOD, NJ 07450 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: JOHN LOBO

VP

04/28/2008

Electronic Signature of Signing Officer or Director

Date