

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 20, 2006 08:00 AM
Secretary of State

DOCUMENT # J70859					
1. Entity Name AMERICAN ASSETS INC.					
Principal Place of Business 2372 QUEENSWOOD CIRCLE KISSIMME FL 34743-3410 US			Mailing Address 2372 QUEENSWOOD CIRCLE KISSIMME FL 34743-3410 US		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country	Zip		Country
6. Name and Address of Current Registered Agent SHARAWAY, HUSSEIN S. 2372 QUEENSWOOD CIRCLE KISSIMMEE FL 34743-3410				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept, the obligations of registered agent.					
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee Will Be \$550.00 Make Check Payable to Florida Department of State				9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	PD	☐ Delete	TITLE	☐ Change	☐ Add
NAME	SHARAWAY, HUSSEIN S.		NAME	U00000440856	
STREET ADDRESS	2372 QUEENSWOOD CIRCLE		STREET ADDRESS	03/03/06-80012-014 150.00	
CITY-ST-ZIP	KISSIMMEE FL 34743-3410		CITY-ST-ZIP		
TITLE	VD	☐ Delete	TITLE	☐ Change	☐ Add
NAME	SHARAWAY, ANNE B.		NAME		
STREET ADDRESS	2372 QUEENSWOOD CIRCLE		STREET ADDRESS		
CITY-ST-ZIP	KISSIMMEE FL 34743-3410		CITY-ST-ZIP		
TITLE	D	☐ Delete	TITLE	☐ Change	☐ Add
NAME	SHARAWAY, TAREK S.		NAME		
STREET ADDRESS	2372 QUEENSWOOD CIRCLE		STREET ADDRESS		
CITY-ST-ZIP	KISSIMMEE FL 34743-3410		CITY-ST-ZIP		
TITLE	D	☐ Delete	TITLE	☐ Change	☐ Add
NAME	SHARAWAY, JOSEPH N.		NAME		
STREET ADDRESS	2372 QUEENSWOOD CIRCLE		STREET ADDRESS		
CITY-ST-ZIP	KISSIMMEE FL 34743-3410		CITY-ST-ZIP		
TITLE		☐ Delete	TITLE	☐ Change	☐ Add
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE	☐ Change	☐ Add
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Hussein S Sharaway* **HUSSEIN S. SHARAWAY** 2-13-2006 407-344-1400