2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L0000007058

Entity Name: ASSUMERE USA, LLC

FILED May 02, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: DOUBLETREE GUEST SUITES 4787 W IRLO BRONSON HWY KISSIMMEE, FL 34746 **Current Mailing Address: New Mailing Address:** DOUBLETREE GUEST SUITES 4787 W IRLO BRONSON HWY KISSIMMEE, FL 34746 FEI Number: 59-3673952 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SOKMENSUER, C. YANKI ESQUIRE C/O SMITH, MACKINNON, GREELEY, ETC 255 SOUTH ORANGE AVÉNUE, SUITE 800 ORLANDO, FL 32801 US 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 MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES: Title: () Change () Addition () Delete SABO, FERNANDO E Name: Name: Address: 4787 WEST IRLO BRONSON HIGHWAY Address: City-St-Zip: KISSIMMEE, FL 34746 City-St-Zip:

Address:

City-St-Zip:

Title: MGR () Delete

Name: SABO, MIRIAM E Address:

4787 WEST IRLO BRONSON HIGHWAY

City-St-Zip: KISSIMMEE, FL 34746

Title: () Change () Addition Name:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: LINDA S. MATTINI 05/02/2005