

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M33499

FILED  
Apr 24, 2007  
Secretary of State

Entity Name: SQUARE ONE ASSOCIATES, INC.

**Current Principal Place of Business:**

290 NW 165TH STREET  
SUITE M-400  
MIAMI, FL 331696457 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 165539  
MIAMI, FL 331165539 US

**New Mailing Address:**

FEI Number: 65-0040656

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GROSSMAN, JEROME  
290 N.W. 165TH STREET (SUITE M-400)  
MIAMI, FL 33169 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: PDS ( ) Delete  
Name: GROSSMAN, JEROME,  
Address: 290 N.W. 165 STREET (SUITE M-400)  
City-St-Zip: MIAMI, FL 33169

Title: VP ( ) Delete  
Name: SASSWE, SCARLET  
Address: 290 N.W. 165 STREET (SUITE M-400)  
City-St-Zip: MIAMI, FL 33169

Title: VP ( ) Delete  
Name: VIEUX, KAREN  
Address: 290 N.W. 165 STREET (SUITE M-400)  
City-St-Zip: MIAMI, FL 33169

**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:

I hereby certify that the information supplied with this filing does not qualify for the 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: JEROME GROSSMAN

P

04/24/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date