

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000004835

FILED  
Jun 29, 2009  
Secretary of State

Entity Name: ASEMOS, INC.

## Current Principal Place of Business:

4770 COLLINS AVE SUITE 2107  
MIAMI BEACH, FL 33140

## New Principal Place of Business:

4779 COLLINS AVE SUITE 2107  
MIAMI BEACH, FL 33140

## Current Mailing Address:

4770 COLLINS AVE SUITE 2107  
MIAMI BEACH, FL 33140

## New Mailing Address:

4779 COLLINS AVE SUITE 2107  
MIAMI BEACH, FL 33140

FEI Number: 38-3784036      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

FITZGERALD, J. PATRICK  
110 MERRICK WAY SUITE 3-B  
CORAL GABLES, FL 33134      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: P ( ) Delete  
Name: ARGUELLO, OLGA A  
Address: 4770 COLLINS AVE SUITE 2107  
City-St-Zip: MIAMI BEACH, FL 33140

Title: S ( ) Delete  
Name: ARELLANO, AGUSTIN  
Address: 4770 COLLINS AVE SUITE 2107  
City-St-Zip: MIAMI BEACH, FL 33140

Title: T ( ) Delete  
Name: MORALES, JULIA  
Address: 4770 COLLINS AVE SUITE 2107  
City-St-Zip: MIAMI BEACH, FL 33140

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: ARGUELLO, OLGA A  
Address: 4779 COLLINS AVE SUITE 2107  
City-St-Zip: MIAMI BEACH, FL 33140

Title: S (X) Change ( ) Addition  
Name: ARELLANO, AGUSTIN  
Address: 4779 COLLINS AVE SUITE 2107  
City-St-Zip: MIAMI BEACH, FL 33140

Title: T (X) Change ( ) Addition  
Name: MORALES, JULIA  
Address: 4779 COLLINS AVE SUITE 2107  
City-St-Zip: MIAMI BEACH, FL 33140

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: OLGA ARGUELLO

P

06/29/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date