

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000073387

Entity Name: ASIA MART, INC

FILED
Apr 13, 2007
Secretary of State

Current Principal Place of Business:

3121 SW 160 AVENUE
MIRAMAR, FL 33027

New Principal Place of Business:

Current Mailing Address:

20365 SW 5 STREET
PEMBROKE PINES, FL 33029

New Mailing Address:

FEI Number: 65-1122255

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TOLENTINO-JABRICA, IMELDA
20365 SW 5 STREET
PEMBROKE PINES, FL 33029 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: D () Delete
Name: TOLENTINO-JABRICA, IMELDA
Address: 20365 SW 5 STREET
City-St-Zip: PEMBROKE PINES, FL 33029

Title: D () Delete
Name: JABRICA, JOVEN
Address: 20365 SW 5 STREET
City-St-Zip: PEMBROKE PINES, FL 33029

Title: D () Delete
Name: TOLENTINO, ORLANDO
Address: 20371 SW 1 STREET
City-St-Zip: PEMBROKE PINES, FL 33029

Title: D () Delete
Name: TOLENTINO, ANA-LIZA
Address: 17681 S W 8TH COURT
City-St-Zip: PEMBROKE PINES, FL 33029

Title: D () Delete
Name: TOLENTINO, EDWIN
Address: 17681 S W 8TH COURT
City-St-Zip: PEMBROKE PINES, FL 33029

Title: D () Delete
Name: TOLENTINO, MA. ARLINA
Address: 20371 SW 1 STREET
City-St-Zip: PEMBROKE PINES, FL 33029

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
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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: IMELDA T. JABRICA

RA

04/13/2007

Electronic Signature of Signing Officer or Director

Date