2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 28, 2007
Secretary of State

DOCUMENT# P01000092308

Entity Name: ASSURED OPTIONS SYSTEM, INC.

Current Principal Place of Business:

3155 NW 82ND AVE
#201
MIAMI, FL 33122

New Principal Place of Business:

Current Mailing Address:

3155 NW 82ND AVE
#201
MIAMI, FL 33122

New Mailing Address:

FEI Number: 65-1141313 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
P.O. BOX 6200 32314-6200
200 E. GAINES ST.
TALLAHASSEE, FL 32399 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: SPD ( ) Delete
Name: SVEN, SCHELE I
Address: 3155 NW 82ND AVE #201
City-St-Zip: MIAMI, FL 33122

Title: D ( ) Delete
Name: NISHIWAKI, NICK
Address: 21150 POINT PLACE #1205
City-St-Zip: MIAMI, FL 33180

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: FRANK, PONCE DE LEON I
Address: 3155 NW 82ND AVE #201
City-St-Zip: MIAMI, FL 33122

Title: SD (X) Change ( ) Addition
Name: NISHIWAKI, NICK
Address: 21150 POINT PLACE #1205
City-St-Zip: MIAMI, FL 33180

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: NICK NISHAWAKI SD 02/28/2007

Electronic Signature of Signing Officer or Director — Date