

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000054732

Entity Name: CASA INVESTMENTS, INC.

FILED
Apr 30, 2006
Secretary of State

Current Principal Place of Business:

890 N. FEDERAL HWY
#209
LANTANA, FL 33462

New Principal Place of Business:

Current Mailing Address:

C/O ATLANTIC FULCRUM, INC.
5112 ARBOR GLEN CIRCLE
LAKE WORTH, FL 33463

New Mailing Address:

FEI Number: 16-1622683 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ATLANTIC FULCRUM, INC.
5112 ARBOR GLEN CIRCLE
LAKE WORTH, FL 33463 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: P () Delete
Name: KIILUNEN, HARRI
Address: 890 N. FEDERAL HWY # 209
City-St-Zip: LANTANA, FL 33462

Title: VP () Delete
Name: HALMESUO, JARI
Address: 890 N. FEDERAL HWY # 209
City-St-Zip: LANTANA, FL 33462

Title: TS () Delete
Name: KANGASKORTE, TIMO
Address: 890 N. FEDERAL HWY # 209
City-St-Zip: LANTANA, FL 33462

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: KIILUNEN, HARRI
Address: 890 N. FEDERAL HWY # 209
City-St-Zip: LANTANA, FL 33462

Title: VPD (X) Change () Addition
Name: HALMESUO, JARI
Address: 890 N. FEDERAL HWY # 209
City-St-Zip: LANTANA, FL 33462

Title: TSD (X) Change () Addition
Name: KANGASKORTE, TIMO
Address: 890 N. FEDERAL HWY # 209
City-St-Zip: LANTANA, FL 33462

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: HARRI KIILUNEN

PD

04/30/2006

Electronic Signature of Signing Officer or Director

Date