

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000066216

Entity Name: CASMIN, INC.

FILED  
Apr 26, 2010  
Secretary of State

**Current Principal Place of Business:**

33003 KARLCT  
LEESBURG, FL 34788

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 895250  
LEESBURG, FL 34789

**New Mailing Address:**

33003 KARLCT  
LEESBURG, FL 34788

FEI Number: 04-3690109

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CASP, MARCY  
33003 KARL CT  
LEESBURG, FL 34788 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/P  
Name: CASP, MARK A  
Address: 33003 KARL COURT  
City-St-Zip: LEESBURG, FL 34788

Title: D  
Name: CASP, JUSTIN  
Address: 4124 NORBECK RD.  
City-St-Zip: ROCKVILLE, MD 20853

Title: D  
Name: GOMINGER, NATALIE  
Address: 4510 CONKLIN DR.  
City-St-Zip: DURHAM, NC 22713

Title: S/T  
Name: CASP, MARCY  
Address: 33003 KARL COURT  
City-St-Zip: LEESBURG, FL 34788

I hereby 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 all other like empowered.

SIGNATURE: MARK A CASP

D/P

04/26/2010

Electronic Signature of Signing Officer or Director

Date