


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 28, 2008 8:00 am**  
**Secretary of State**

05-28-2008 90136 001 \*1,350.00

<b>DOCUMENT # P02000075308</b>	
1. Entity Name AS/NET.LA, CORP.	

Principal Place of Business 11402 NW 41ST ST STE # 211 DORAL, FL 33178	Mailing Address 11402 NW 41ST ST STE # 211 DORAL, FL 33178
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**66012510**



2. Principal Place of Business - No P.O. Box # 11402 NW 41ST ST. Suite, Apt. #, etc. Suite 211 # 520 City & State Doral, FL Zip 33178	3. Mailing Address 11402 NW 41ST ST. Suite, Apt. #, etc. Suite 211 # 520 City & State Doral, FL Zip 33178
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04072008 Chg-P CR2E034 (12/06)

6. Name and Address of Current Registered Agent RODRIGUEZ, FERNANDO 8100 GENEVA CT BLDG. C #240 MIAMI, FL 33166	
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7. Name and Address of New Registered Agent Name <u>Rodriguez, Fernando</u> Street Address (P.O. Box Number is Not Acceptable) <u>11402 NW 41ST ST.</u> <u>Suite 211 # 520</u> City <u>Doral</u> FL Zip Code <u>33178</u>	
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2008 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RODRIGUEZ, JOSE F 11402 NW 41ST ST, STE 211 DORAL, FL 33178 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Rodriguez, Jose F 11402 NW 41ST ST, STE 211 # 520 Doral, FL 33178. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PEDRAZA, FERNANDO 780 NW 42ND AVE. STE 420 MIAMI, FL 33126 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Pedraza, Fernando 11402 NW 41ST ST, STE 211 # 520 Doral, FL 33178 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARTINEZ, GERMAN 780 NW 42ND AVE. STE 420 MIAMI, FL 33126 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Martinez, German 11402 NW 41ST ST, STE 211 # 520 Doral, FL 33178 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D OSORIO, JOSE G 780 NW 42ND AVE. STE 420 MIAMI, FL 33126 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Osorio, Jose G 11402 NW 41ST ST, STE 211 # 520 Doral, FL 33178 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RODRIGUEZ, FERNANDO H 780 NW 42ND AVE. STE 420 MIAMI, FL 33126 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Rodriguez, Fernando H 11402 NW 41ST ST, STE 211 # 520 Doral, FL 33178 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TOLEDO, GUSTAVO 8100 GENEVA CT BLDG # 240 MIAMI, FL 33166 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Toledo, Gustavo 11402 NW 41ST ST, STE 211 # 520 Doral, FL 33178 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

04/28/08