

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000135276

FILED  
Apr 22, 2011  
Secretary of State

Entity Name: GASNET INC.

**Current Principal Place of Business:**

800 CLAUGHTON ISLAND DR SUITE 1601  
MIAMI, FL 33131 US

**New Principal Place of Business:**

**Current Mailing Address:**

800 CLAUGHTON ISLAND DR SUITE 1601  
MIAMI, FL 33131 US

**New Mailing Address:**

FEI Number: 37-1453072

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NEGRON, SONIA  
800 CLAUGHTON ISLAND DR SUITE 1601  
MIAMI, FL 33131 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

**OFFICERS AND DIRECTORS:**

Title: C  
Name: NEGRON, FRANCISCO  
Address: 1731 NW 51ST AVE  
City-St-Zip: LAUDERHILL, FL 33313

Title: C  
Name: MORALES, JESSICA  
Address: 6122 SW 34ST  
City-St-Zip: DAVIE, FL 33314

Title: M  
Name: ROLON, LILLIAN  
Address: 6122 SW 34TH ST  
City-St-Zip: DAVIE, FL 33314

Title: P  
Name: NEGRON, SONIA I  
Address: 800 CLAUGHTON ISLAND DR SUITE 1601  
City-St-Zip: MIAMI, FL 33131

Title: V/T  
Name: FIGUEROA, ANTONIO  
Address: 5872 KELSEY LANE  
City-St-Zip: TAMARAC, FL 33321

Title: S  
Name: VILMA, DELGADO L  
Address: 10 SOUTHERN CROSS CIRCLE, APT 201  
City-St-Zip: BOYTON BEACH, FL 33436

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: SONIA NEGRON

P

04/22/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date