

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000093964

**FILED**  
**Apr 17, 2006**  
**Secretary of State**

**Entity Name:** ASSET INVESTIGATIONS AND RECOVERY, INC.

**Current Principal Place of Business:**

4902 16TH AVE SOUTH  
SUITE D  
TAMPA, FL 33619

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 2971  
TAMPA, FL 33601 US

**New Mailing Address:**

**FEI Number:** 20-1231776

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FERAROLIS, STAMATIS  
4902 16TH AVE SOUTH  
SUITE D  
TAMPA, FL 33619 US

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

FERAROLIS, STAMATIS  
PO BOX 2971  
TAMPA, FL 33601 US

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:**

04/17/2006

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** CEO ( ) Delete  
**Name:** FERAROLIS, STAMATIS  
**Address:** 4902 16TH AVE SOUTH  
**City-St-Zip:** TAMPA, FL 33619

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

**Title:** CEO (X) Change ( ) Addition  
**Name:** FERAROLIS, STAMATIS  
**Address:** PO BOX 2971  
**City-St-Zip:** TAMPA, FL 33601

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:** STAMATIS FERAROLIS

CEO

04/17/2006

Electronic Signature of Signing Officer or Director

Date