


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 03, 2005 8:00 am**  
**Secretary of State**

05-03-2005 90146 001 \*\*\*158.75

<b>DOCUMENT # P04000099774</b> 1. Entity Name <b>DASS INVESTMENTS, INC.</b>																					
Principal Place of Business 1141 KANE CONCOURSE BAY HARBOR ISLANDS, FL 33154				Mailing Address 1141 KANE CONCOURSE BAY HARBOR ISLANDS, FL 33154																	
2. Principal Place of Business <b>7601 EAST TREASURE DR. #2024</b>				3. Mailing Address <b>7601 EAST TREASURE DR. #2024</b>																	
Suite, Apt., etc. <b>#2024</b>				Suite, Apt., etc. <b>#2024</b>																	
City & State <b>NORTH BAY VILLAGE, FLA.</b>				City & State <b>NORTH BAY VILLAGE, FLA.</b>																	
Zip <b>33141</b>		Country <b>U.S.A.</b>		4. FEI Number <b>20-1463324</b>																	
5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				Applied For <input type="checkbox"/> Not Applicable																	
6. Name and Address of Current Registered Agent  <b>PATRICK, MARTY ESQ.</b> <b>1141 KANE CONCOURSE</b> <b>BAY HARBOR ISLANDS, FL 33154</b>				7. Name and Address of New Registered Agent Name <b>ROCHELLE SCHULTZ</b> Street Address (P.O. Box Number is Not Acceptable) <b>7601 EAST TREASURE DRIVE #2024</b> City <b>NORTH BAY VILLAGE</b> <b>FL</b> Zip Code <b>33141</b>																	
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: <u><i>Rochelle Schultz</i></u> <b>ROCHELLE SCHULTZ - PRESIDENT</b> <b>4/22/05</b> <small>Signature, typed or printed name of registered agent and fee if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>																					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2005 Fee will be \$550.00</b>				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>																	
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11																	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: <u><i>Rochelle Schultz</i></u> <b>ROCHELLE SCHULTZ - P</b> <b>4/22/05-865-7774</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																					

50047243

