2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000138744

Entity Name: ASEE INVESTMENTS, INC.

FILED Jul 20, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

12961 NW 8TH STREET MIAMI, FL 33182 US

Current Mailing Address: New Mailing Address:

12961 NW 8TH STREET MIAMI, FL 33182 US

FEI Number: 41-2160629 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SAN MARTIN, SARA

66 W. FLAGLER STREET

SUITE 400

MIAMI, FL 33130 US

ECHEVERRIA, SARA

66 W. FLAGLER STREET

SUITE 410

MIAMI, FL 33130 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: SARA ECHEVERRIA 07/20/2005

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT () Delete Title: DPT (X) Change () Addition

Name: SAN MARTIN, SARA Name: ECHEVERRIA, SARA

Address: 66 W. FLAGLER STREET, SUITE 400 Address: 66 W. FLAGLER STREET, SUITE 410

City-St-Zip: MIAMI, FL 33130 US City-St-Zip: MIAMI, FL 33130 US

Title: VP,S () Delete Title: VP,S (X) Change () Addition

Name: ECHEVERRIA, EDUARDO Name: ECHEVERRIA, EDUARDO

Address: 66 W. FLAGLER STREET, SUITE 400 Address: 66 W. FLAGLER STREET, SUITE 410

City-St-Zip: MIAMI, FL 33130 US City-St-Zip: MIAMI, FL 33130 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SARA ECHEVERRIA PRES 07/20/2005