2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007
Secretary of State

DOCUMENT# P05000089271

Entity Name: ASSA CORPORATION

Current Principal Place of Business:

8651 NW 55 PLACE
CORAL SPRINGS, FL 33067

New Principal Place of Business:

Current Mailing Address:

8651 NW 55 PLACE
CORAL SPRINGS, FL 33067

New Mailing Address:

FEI Number: 20-3056416 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

AMIN, MUHAMMAD
8651 NW 55 PLACE
CORAL SPRINGS, FL 33067 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: AMIN, MUHAMMAD
Address: 8651 NW 55 PLACE
City-St-Zip: CORAL SPRINGS, FL 33067

Title: D ( ) Delete
Name: MAJID, SHAFI A
Address: 8651 NW 55 PLACE
City-St-Zip: CORAL SPRINGS, FL 33067

Title: D ( ) Delete
Name: ABOOBAKER, SOHAIL
Address: 8651 NW 55 PLACE
City-St-Zip: CORAL SPRINGS, FL 33067

Title: D ( ) Delete
Name: GHAFFAR, ASIF
Address: 8651 NW 55 PLACE
City-St-Zip: CORAL SPRINGS, FL 33067

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: MUHAMMAD AMIN PD 04/30/2007

Electronic Signature of Signing Officer or Director Date