

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000122371

Entity Name: RASMIA, INC.

FILED
Sep 01, 2006
Secretary of State

Current Principal Place of Business:

C/O LEONARDO D. GRAVIER, CPA
201 ALHAMBRA CIRCLE, SUITE 901
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

C/O LEONARDO D. GRAVIER, CPA
201 ALHAMBRA CIRCLE, SUITE 901
CORAL GABLES, FL 33134

New Mailing Address:

C/O BERMAN RENNERT VOGEL & MANDLER, P.A.
100 S.E. 2ND STREET, SUITE 2900
MIAMI, FL 33131

FEI Number: 47-0960734

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REGISTERED AGENTS OF FLORIDA, LLC
100 SOUTHEAST SECOND STREET, SUITE 2900
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

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:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS () Change (X) Addition
Name: FREYRE, HECTOR JULIO
Address: 201 ALHAMBRA CIRCLE, SUITE 901
City-St-Zip: CORAL GABLES, FL 33134

Title: VPT () Change (X) Addition
Name: WRIGHT DE FREYRE, MARGARITA S.
Address: 201 ALHAMBRA CIRCLE, SUITE 901
City-St-Zip: CORAL GABLES, FL 33134

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: HECTOR JULIO FREYRE

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09/01/2006

Electronic Signature of Signing Officer or Director

_____ Date