

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000048870

Entity Name: A SQUARED, INC.

FILED
Apr 29, 2007
Secretary of State

Current Principal Place of Business:

126 EVERNIA STREET
JUPITER, FL 33458 US

New Principal Place of Business:

Current Mailing Address:

9241 CYPRESS HOLLOW DRIVE
PALM BEACH GARDENS, FL 33418 US

New Mailing Address:

FEI Number: 20-4640001

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BALASIS, ANDREAS
9241 CYPRESS HOLLOW DRIVE
PALM BEACH GARDENS, FL 33418 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: P,T () Delete
Name: BALASIS, ANDREAS
Address: 9241 CYPRESS HOLLOW DRIVE
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

Title: VP,S () Delete
Name: GRISPINO, ANGELA R
Address: 9241 CYPRESS HOLLOW DRIVE
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

Title: D (X) Delete
Name: ANDREAS, BALASIS
Address: 9241 CYPRESS HOLLOW DRIVE
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: BALASIS, ANDREAS
Address: 9241 CYPRESS HOLLOW DRIVE
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

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: ANGELA GRISPINO

VP

04/29/2007

Electronic Signature of Signing Officer or Director

Date