2007 FOR PROFIT CORPORATION

FILED May 18, 2007 8:00 am Secretary of State ANNUAL REPORT 05-18-2007 90019 004 ***150.00 **DOCUMENT # P06000106826** ASSÁF INTERNATIONAL, INC. 40116047 Mailing Address 2800 WINTER LAKE ROAD LAKELAND, FL 33803 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. 04172007 CR2E034 (12/06) Applied For City & State 432465 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) 2800 WINTER LAKE ROAD LAKELAND, FL 33803-970 City Zip Code FL 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 П Trust Fund Contribution Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. Addition ☐ Delete TITI F ☐ Change ALMOG, ASSAF NAME 2800 WINTER LAKE ROAD STREET ADDRESS CITY-ST-ZIP LAKELAND, FL 33803 ☐ Addition ☐ Delete TITLE ☐ Change ALMOG, ELINA NAME 2800 WINTER LAKE ROAD STREET ADDRESS CITY-ST-ZIP LAKELAND, FL 33803 TITLE ☐ Delete ☐ Change Addition NAME STREET ADDRESS CHY-ST-ZIP ☐ Change ■ Addition ☐ Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

SIGNATURE:

Principal Place of Business

2800 WINTER LAKE ROAD

LAKELAND, FL 33803

Suite, Apt. #, etc.

ALLEN & BAILEY, P.A.

PST

VΡ

City & State

Zip

SIGNATURE.

10.

TITLE

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ELINARIX TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

Daytime Phone #

☐ Change

Addition

5/15/07 HOILLOOH 10F2
To Whom It May Concern. YLEASE ACCEPT MY Check # 802 in the Amount or #15000 to file 2007 FOR PROFIT CORPORATION ANNUAL REPORT. I REalisé I Am late filma however I was unaware of the Requirement. I never RECEIVED A notice from the State Regarding the filing COST OR dradline. Fortunately, my Eccountant notified me regarding the Requirement. In the future please SEND me, 25 WELLAS my lawyer, all necessary paperwork. My lawyers teldress is lested in the Réport. Please conturse Notifying him. But con you also please notify me at our place of business

ATTACHMENT 40/16047 FE1 20-5432465

My business kalaress 15: International INC HSSAF 18090 Collins Avenue 33160 Sunny Isles, FL. 781-2756 Juy much. Sincerely Thank you Elina Az

Assof International, Inc