

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 06, 2006 08:00 AM**  
**Secretary of State**

|                                                           |                                                                                   |
|-----------------------------------------------------------|-----------------------------------------------------------------------------------|
| <b>DOCUMENT # V31377</b>                                  |  |
| 1. Entity Name<br><b>ASIALINES INVESTMENT CORPORATION</b> |                                                                                   |

|                                                                                               |                                                                                |
|-----------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------|
| Principal Place of Business<br><b>3261 SE MORNINGSID BLVD.<br/>PORT ST LUCIE, FL 34952 US</b> | Mailing Address<br><b>3261 SE MORNINGSID BLVD<br/>PT ST LUCIE, FL 34952 US</b> |
|-----------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------|



02102006 No Chg-P CR2E034 (11/05)

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|                                    |                                      |
|------------------------------------|--------------------------------------|
| 4. FEI Number<br><b>65-0352295</b> | Applied For<br><b>Not Applicable</b> |
|------------------------------------|--------------------------------------|

|                                                           |                                       |
|-----------------------------------------------------------|---------------------------------------|
| 5. Certificate of Status Desired <input type="checkbox"/> | <b>\$8.75</b> Additional Fee Required |
|-----------------------------------------------------------|---------------------------------------|

**6. Name and Address of Current Registered Agent**

**CRARY, LAWRENCE E III  
555 COLORADO AVE  
STUART, FL 34994**

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3. 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 the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reappointing) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

**10. OFFICERS AND DIRECTORS**

|                                                |                                                                       |
|------------------------------------------------|-----------------------------------------------------------------------|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | PSD<br>VERBELEN, EDDY<br>3261 SW MORNINGSID BLVD<br>PORT ST LUCIE, FL |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                       |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                       |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                       |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                       |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                       |

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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.

SIGNATURE: Edward VERBELEN CEO Feb 24, 2006 (FR) 3980724  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #