

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000124719

FILED
Mar 20, 2006
Secretary of State

Entity Name: A L X STUDIOS, INC.

Current Principal Place of Business:

3408 TORREMOLINOS AVE
DORAL, FL 33178

New Principal Place of Business:

414 NE 26 TERRACE
BOCA RATON, FL 33431

Current Mailing Address:

4243 NW 107 AVE, #154
DORAL, FL 33178

New Mailing Address:

414 NE 26 TERRACE
BOCA RATON, FL 33431

FEI Number: 43-1985288

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUQUE, ALEX
3408 TORREMOLINOS AVE
DORAL, FL 33178 US

Name and Address of New Registered Agent:

DUQUE, ALEX
414 NE 26 TERRACE
BOCA RATON, FL 33431 US

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: ALEX DUQUE

03/20/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DUQUE, ALEX
Address: 3408 TORREMOLINOS AVE
City-St-Zip: DORAL, FL 33178

Title: VPD () Delete
Name: DELGADO, PILAR
Address: 3408 TORREMOLINOS AVE
City-St-Zip: DORAL, FL 33178

Title: D () Delete
Name: BROOKS, ROXANNE
Address: 3408 TORREMOLINOS AVE
City-St-Zip: DORAL, FL 33178

Title: D () Delete
Name: LAZARTE, FELIPE L
Address: 3408 TORREMOLINOS AVE
City-St-Zip: DORAL, FL 33178

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: DUQUE, ALEX
Address: 414 NE 26 TERRACE
City-St-Zip: BOCA RATON, FL 33431

Title: VPD (X) Change () Addition
Name: DELGADO, PILAR
Address: 414 NE 26 TERRACE
City-St-Zip: BOCA RATON, FL 33431

Title: D (X) Change () Addition
Name: BROOKS, ROXANNE
Address: 414 NE 26 TERRACE
City-St-Zip: BOCA RATON, FL 33431

Title: D (X) Change () Addition
Name: LAZARTE, FELIPE L
Address: 414 NE 26 TERRACE
City-St-Zip: BOCA RATON, FL 33431

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: ALEX DUQUE

PSD

03/20/2006

Electronic Signature of Signing Officer or Director

Date