

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000103277

Entity Name: AMORAH CORP.

FILED
Mar 15, 2006
Secretary of State

Current Principal Place of Business:

8162 VIA BELLA NOTTE
ORLANDO, FL 32836 US

Current Mailing Address:

8162 VIA BELLA NOTTE
ORLANDO, FL 32836 US

New Principal Place of Business:

8731 THE ESPLANADE
60
ORLANDO, FL 32836 US

New Mailing Address:

8731 THE ESPLANADE
60
ORLANDO, FL 32836 US

FEI Number: 20-3199862

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHUKLA, SONU CPA
5950 LAKEHURST DRIVE
STE 287
ORLANDO, FL 32819 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 () Delete
Name: BOZZA, ELIANE
Address: 8162 VIA BELLA NOTTE
City-St-Zip: ORLANDO, FL 32836 US

Title: VP () Delete
Name: PARISI, MARIO JR.
Address: 8162 VIA BELLA NOTTE
City-St-Zip: ORLANDO, FL 32836 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BOZZA, ELIANE
Address: 8731 THE ESPLANADE #60
City-St-Zip: ORLANDO, FL 32836 US

Title: VP (X) Change () Addition
Name: PARISI, MARIO JR.
Address: 8731 THE ESPLANADE #60
City-St-Zip: ORLANDO, FL 32836 US

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: ELIANE BIGHETTI BOZZA

P

03/15/2006

Electronic Signature of Signing Officer or Director

Date