FILED
Feb 17, 2006 08:00 AM
Secretary of State

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

DOCUMENT # A04000001962

1. Entity Name
DIRECTO HISPANIC PROMOTIONS, LTD.

Principal Place of Business	Mailing Address
2701 PONCE DE LEON BLVD. SUITE 202 CORAL GABLES, FL 33134	2701 PONCE DE LEON BLVD. SUITE 202 CORAL GABLES, FL 33134

DO NOT WRITE IN THIS SPACE

01272006 No Chg-LP CR2E003 (11/05)

4. FEI Number
NOT APPLICABLE
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MURAI WALD BIONDO MORENO & BROCHIN, P.A.
TWO ALHAMBRA PLAZA
PENTHOUSE 1B
CORAL GABLES, FL 33134

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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 the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable

FILE NOW!!! FEE IS $500.00
After May 1, 2006, Fee will be $900.00

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION

DOCUMENT #	L04000033723
NAME	DIRECTO HISPANIC PROMOTIONS, LLC
STREET ADDRESS	2701 POINCE DE LEON BOULEVARD, SUITE 202
CITY-ST-ZIP	CORAL GABLES, FL
DOCUMENT #	
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02/28/06-80051-004 500.00

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STAPLE CHECK HERE

14. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

X **SIGNATURE:** _____ 2/14/06 305 446-5266
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #