2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2006
Secretary of State

DOCUMENT# N46904

Entity Name: AMIGOS DE LAS AMERICAS, INC.

Current Principal Place of Business:

4437 POST AVE
MIAMI BEACH, FL 33140

New Principal Place of Business:

Current Mailing Address:

4437 POST AVE
MIAMI BEACH, FL 33140

New Mailing Address:

FEI Number: 65-0306510 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JIMENEZ, ADOLFO E
701 BRICKELL AVE.
STE. 3000
MIAMI, FL 33131 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

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: JIMENEZ, ADOLFO E.,
Address: 4437 POST AVE
City-St-Zip: MIAMI BEACH, FL

Title: D ( ) Delete
Name: LORENZO, LORENZO
Address: 4716 ALTON RD
City-St-Zip: MIAMI, FL 33140

Title: TD ( ) Delete
Name: FALKENBERG, ULRIKE
Address: 4437 POST AVE
City-St-Zip: MIAMI BEACH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ULRIKE FALKENBERG TD 04/18/2006

Electronic Signature of Signing Officer or Director — Date