2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 21, 2006
Secretary of State

DOCUMENT# N99000006038

Entity Name: DINGGIN, INC.

Current Principal Place of Business:

7521 BUCCANEER AVE
NORTH BAY VILLAGE, FL 33141

New Principal Place of Business:

Current Mailing Address:

7521 BUCCANEER AVE
NORTH BAY VILLAGE, FL 33141

New Mailing Address:

FEI Number: 65-0824289 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PUTLEK, MARISSA
7521 BUCCANEER AVE
NORTH BAY VILLAGE, FL 33141 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:	MD	( ) Delete
Name:	CESAR, JULIO JR	
Address:	840 NW 124TH STREET	
City-St-Zip:	NO MIAMI, FL 33161	
Title:	TD	( ) Delete
Name:	PUTLEK, MARISSA	
Address:	7521 BUCCANEER AVE.	
City-St-Zip:	N. BAY VILLAGE, FL 33141	
Title:	P	( ) Delete
Name:	LEWIS, ANNA	
Address:	9930 NW 94 CT	
City-St-Zip:	SUNRISE, FL 33351	
Title:	VP	( ) Delete
Name:	GO, ROBERTO	
Address:	335 LEGARE CT	
City-St-Zip:	JUPITER, FL 33458	
Title:	D	( ) Delete
Name:	ECO, ORO	
Address:	3121 NW 107 DR.	
City-St-Zip:	SUNRISE, FL 33351	
Title:	SD	( ) Delete
Name:	CARRASCO, JOY	
Address:	8415 NW 201 ST	
City-St-Zip:	MIAMI, FL 33015	

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:	
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: MARISSA PUTLEK, TD 01/21/2006

Electronic Signature of Signing Officer or Director — Date