

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000044928

FILED
May 01, 2007
Secretary of State

Entity Name: EXPRESSA PUBLICACIONES, INC.

Current Principal Place of Business:

10111 N.W. 5TH TERR.
MIAMI, FL 33172

New Principal Place of Business:

6380 NW 114 AV
DORAL, FL 33178

Current Mailing Address:

10111 N.W. 5TH TERR.
MIAMI, FL 33172

New Mailing Address:

6380 NW 114 AV
DORAL, FL 33178

FEI Number: 65-1140583

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAROCCO, EVELYN
12405 S.W. 110TH SOUTH CANAL ST.
MIAMI, FL 33186 US

Name and Address of New Registered Agent:

ALBENIZ, PALMA
6380 NW 114 AV
#322
DORAL, FL 33178 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: ALBENIZ PALMA

05/01/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PALMA, ARBENZ
Address: 11610 NW 76TH TERR
City-St-Zip: MIAMI, FL 33178

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PALMA, ALBENIZ
Address: 6380 NW 114 AV
City-St-Zip: DORAL, FL 33178

I hereby certify that the information supplied with this filing does not qualify 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: ALBENIZ PALMA

P

05/01/2007

Electronic Signature of Signing Officer or Director

Date