

May 06 06 02:45p

Felix M. Valido

305-534-2359

FILED

May 16, 2006 08:00 AM
Secretary of State

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000045396	
1. Entity Name FERNANDO HIDALGO PRODUCTIONS INC.	



Principal Place of Business 12840 B. BAYSHORE DRIVE NORTH MIAMI FL 33181-2427	Mailing Address 1820 JAMES AVE 2B MIAMI BEACH, FL 33139
---	---



DO NOT WRITE IN THIS SPACE

05062006 No Chg-0

4. FEI Number
30-0100095

5. Certificate of State Debit \$8.75 Annual Fee Required

6. Name and Address of Current Registered Agent

VALIDO, FELIX M
1820 JAMES AVENUE APT. 2B
MIAMI BEACH, FL 33139

DO NOT WRITE IN THIS SPACE

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, and certifies that it is in compliance with the obligations of registered agent.

SIGNATURE _____ (Signature, typed or printed name, of registered agent and State if applicable. (NOTE: Registered Agent's sign. is required when reconstituting.)

FILE NOW!! FEE IS \$150.00
Due by September 6, 2006

9. Election Campaign Financing Trust Fund Contribution **\$5.00** May Be Added to Fees

In accordance with s. 607.123(2)(b), this corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CORONA-HIDALGO, FERNANDO 12840 B. BAYSHORE DRIVE NORTH MIAMI, FL 331812427
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000564427
05/20/06-80067-002 158.75

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes, and that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath. I declare that all officers of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name has not been changed, or is an attachment with an address, with all other like empowerment.

SIGNATURE: Fernando Hidalgo
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR