

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000061257

**FILED**  
**Apr 23, 2011**  
**Secretary of State**

**Entity Name:** ADOLFO ANGEL PRODUCTIONS, INC.

**Current Principal Place of Business:**

C/O MIGUEL M. JUNCADELLA, C.P.A.  
3001 PONCE DE LEON BLVD., #211  
CORAL GABLES, FL 33134 US

**New Principal Place of Business:**

C/O MIGUEL M. JUNCADELLA, C.P.A.  
3001 PONCE DE LEON BLVD., #211  
CORAL GABLES, FL 33134 US

**Current Mailing Address:**

C/O IVAN A. GOMEZ, ESQ.  
601 BRICKELL KEY DRIVE SUITE 507  
MIAMI, FL 33131 US

**New Mailing Address:**

**FEI Number:** 13-4204728      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

IAG CORPORATE SERVICES, INC.  
601 BRICKELL KEY DRIVE  
SUITE 507  
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:** PTD  
**Name:** ALBA, ADOLFO A  
**Address:** 407 LINCOLN ROAD, SUITE 8-D  
**City-St-Zip:** MIAMI, FL 33139 US

**Title:** S  
**Name:** ALBA RUVALCABA, MAYRA A  
**Address:** 407 LINCOLN ROAD, SUITE 8-D  
**City-St-Zip:** MIAMI, FL 33139 US

I hereby 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 all other like empowered.

SIGNATURE: ADOLFO A. ALBA

P

04/23/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date