## 2006 FOR PROFIT CORPORATION ANNUAL REPORT.

## Jan 31, 2006 08:00 AN DOCUMENT # P02000116219 **Secretary of State** LALO PRODUCTION, INC. Mailing Address Principal Place of Business 8754 NW 107 TERR 8754 NW 107 TERR HIALEAH GARDENS, FL 33018 HIALEAH GARDENS, FL 33018 01082006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 16-1636524 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent VAZQUEZ, EULALIO DO NOT WRITE 8754 NW 107 TERR HIALEAH GARDENS, FL 33018 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 -UDDUDU408844 П Trust Fund Contribution. Added to Fees 02/08/06-80076-006 150,00 OFFICERS AND DIRECTORS 10. TITLE NAME VAZQUEZ, EULALIO STREET ADDRESS 8754 NW 107 TERR CITY-ST-ZIP HIALEAH GARDENS, FL 33018 TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE MAKE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Lulatio La Supplementation of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

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SIGNATURE: Lulation Davis the change of the corporation of the receiver or trustee and statutes. If further certify that the information indicated in Chapter 119, Florida Statutes, I further certify that the information indicated on this report or supplemental report or director.