2007 FOR PROFIT CORPORATION ANNUAL REPORT

May 08, 2007 8:00 am Secretary of State **DOCUMENT # P03000008949** 05-08-2007 90005 012 ***150.00 1. Entity Name SOUTH AMERICAN PRODUCTIONS, INC. 411107730 Mailing Address Principal Place of Business 8360 W FLAGLER ST #200 8360 W FLAGLER ST #200 MIAMI, FL 33144 MIAMI, FL 33144 No Chg-P CR2E034 (11/05) 04292007 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 51-0443991 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CHAMAH, HERNAN L DO NOT WRITE 8360 W FLAGLER ST #200 MIAMI, FL 33144 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 Trust Fund Contribution. \Box Added to Fees After May 1, 2007 Fee will be \$550.00 OFFICERS AND DIRECTORS CHAMAH, HERNAN L NAME, STRÈE ADDRESS 8360 W FLAGLER ST #200 CITY-ST-ZIP MIAMI, FL 33144 TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET AODRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby 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 arri an officer or director of the corporation or the receiver or true true there 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:

TITLE NAME STREET ADDRESS CITY-ST-ZIP

Daytime Phone #

FILED