2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000038097

1. Entity Name
DIRMAG INC.

Principal Place of Business	Mailing Address
10400 N.W. 33RD ST. SUITE 270 MIAMI, FL 33172	10400 N.W. 33RD ST. SUITE 270 MIAMI, FL 33172

66017799

02172006   No Chg-P   CR2E034 (11/05)

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4. FEI Number	Applied For
32-0069826	Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CORONADO, NESTOR
7360 CORAL WAY
SUITE 21
MIAMI, FL 33155

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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)   DATE

| **FILE NOW!!! FEE IS $150.00** **After May 1, 2006 Fee will be $550.00** | 9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees | |

10.	OFFICERS AND DIRECTORS	
TITLE	PSD	
NAME	CACERES, NELSON E	
STREET ADDRESS	5600 NW 107TH AVE. #1411	
CITY-ST-ZIP	MIAMI, FL 33178	
TITLE	VD	
NAME	CORONADO, NESTOR	
STREET ADDRESS	7360 CORAL WAY STE 21	
CITY-ST-ZIP	MIAMI, FL 33155	
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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12. I hereby certify that the information supplied with this filing 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 or 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: _____ Nelson Caceres   5-28-06   3054335790

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #