03/09/2005 13:36 3056745881 WAVERLY

FILED
Apr 12, 2005 8:00 am
Secretary of State
04-12-2005 90146 036 ***150.00

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000067108

1. Entity Name
FERLLEN PRODUCTIONS GROUP, CORP.

Principal Place of Business	Mailing Address
1680 MICHIGAN AVE. SUITE 700 MIAMI BEACH, FL 33139	1680 MICHIGAN AVE. SUITE 700 MIAMI BEACH, FL 33139

2. Principal Place of Business	3. Mailing Address
111 NE 3rd Ave	
Suite, Apt. # etc. 406	Suite, Apt. #, etc.
City & State Miami FL	City & State
Zip 33132 Country 3	Zip Country

03092005 Chg-P CR2E034 (10/03)

4. FEI Number 61-1461628 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
FERLLEN, ALEJANDRO 1680 MICHIGAN AVE. SUITE 700 MIAMI BEACH, FL 33139	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when amending

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May be Added to Fee

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P FERLLEN, ALEJANDRO 1680 MICHIGAN AVE. SUITE 700 MIAMI BEACH, FL 33139	☐ Delete	☐ Change ☐ Addition	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D RUIZ TEZIS, GILBERTO 1680 MICHIGAN AVE. SUITE 700 MIAMI BEACH, FL 33139	☐ Delete	☐ Change ☐ Addition	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CONTRISCIANI, PABLO 1680 MICHIGAN AVE. SUITE 700 MIAMI BEACH, FL 33139	☐ Delete	☐ Change ☐ Addition	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D VALDIVIA, BEATRIZ 1680 MICHIGAN AVE. SUITE 700 MIAMI BEACH, FL 33139	☐ Delete	☐ Change ☐ Addition	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	☐ Change ☐ Addition	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	☐ Change ☐ Addition	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: _____
SIGNATURE AND TYPED OR PRINTED NAME OF ASSISTING OFFICER OR DIRECTOR Date Daytime Phone #