

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000091295

FILED
Apr 26, 2007
Secretary of State

Entity Name: CHOCOLATE'S PRODUCTIONS CORP.

Current Principal Place of Business:

3194 NW 49 ST
MIAMI, FL 33142

New Principal Place of Business:

Current Mailing Address:

3194 NW 49 ST
MIAMI, FL 33142

New Mailing Address:

FEI Number: 57-1183638

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRANCO, MARIA M
3194 NW 49 ST
MIAMI, FL 33142 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 () Delete
Name: FRANCO, MARIA M
Address: 3194 NW 49 ST
City-St-Zip: MIAMI, FL 33142

Title: V () Delete
Name: SANCHEZ, VICTOR
Address: 3194 NW 49 ST
City-St-Zip: MIAMI, FL 33142

Title: S (X) Delete
Name: FRANCO, HUMBELINA
Address: 3194 NW 49 ST
City-St-Zip: MIAMI, FL 33142

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change () Addition
Name: FRANCO, HUMBELINA
Address: 3194 NW 49 ST
City-St-Zip: MIAMI, FL 33142

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: MARIA M FRANCO

PTD

04/26/2007

Electronic Signature of Signing Officer or Director

Date