2006 FOR PROFIT CORPORATION

Apr 24, 2006 8:00 am Secretary of State ANNUAL REPORT DOCUMENT # P04000028586 04-24-2006 90379 045 ***158.75 RENACER PRODUCTIONS, INC. 4000ta Principal Place of Business Mailing Address 10845 NW 50TH ST 10845 NW 50TH ST #207 #207 MIAMI, FL 33178 MIAMI, FL 33178 2. Principal Place of Business 3. Mailing Address 10775 N.W. 50 Street #104 Suite, Apt. #. etc. 10775 N.W. 50 Street #104 04202006 Chq-P CR2E034 (11/05) <u>Miami, Florida</u> City & State <u>Miami, Florida</u> City & State 4. FEI Number Applied For 20-0727293 Not Applicable Country Zip Country Zio \$8.75 Additional 5. Certificate of Status Desired 33178 _USA 33178 USA 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ELOZUA, JOSE J Street Address (P.O. Box Number is Not Acceptable) 8881 FONTAINBLEAU BLVD #B-304 MIAMI, FL 33172 City 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 Signature, typed or annied hamo of transiered agent and afterflapplicable (HOTE 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 Trust Fund Contribution Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11 IIDE TITLE ☐ Delete Thance Addition DIAZ, WILSON ANDRES NAME NAME 10775 N.W. 50 St.#104 STREET ADDRESS 10845 NW 50TH ST #207 STREET ADDRESS Miami, Fl 33178 MIAMI, FL 33178 CITY-ST ZIP CITY-ST ZIP Addition Delete XI Change TITLE THLE GONZALEZ, ERIKA NAME NAME 10775 N.W. 50 St.#104 10845 NW 50TH ST #207 STREET ADDRESS STREET ADDRESS Miami, Fl 33178 CITY ST 712 MIAMI, FL 33178 CITY-ST ZIP ☐ Delete TITLE ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY ST ZIP CITY ST-ZIP TITLE ☐ Delete THUE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY ST ZIP CITY ST ZIP Delete 1016 ☐ Channe ☐ Add:tine TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST ZIP

12. I hereby certify that the information supplied with this filing cloes 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

STREET ADDRESS CITY ST ZIP

DILE

SIGNATURE:

THLE NAME STREET ADDRESS

CITY ST ZIP

WILSON A. DIAZ () SIGNATURE AND TYPED OR PRINTED N

☐ Delete

4-20-2006

Cel.786-357-8053

☐ Change

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