

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

**FILED
Apr 19, 2005 8:00 am
Secretary of State**

04-19-2005 90374 046 ***150.00

DOCUMENT # PO4000038669
1. Entity Name RICHAR DOBAL PRODUCTIONS INC

DO NOT WRITE IN THIS SPACE

40061305

2. Principal Place of Business 33 ALHAMBRA CIRCLE Suite, Apt. #, etc. APT 11 City & State CORAL GABLES, FL Zip 33134-4633	3. Mailing Address SAME Suite, Apt. #, etc. SAME City & State SAME Zip 33134-4633	Country USA	Country USA
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4. FEI Number 55-0874064	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

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7. Name and Address of Current Registered Agent	
Name RICHAR DOBAL	
Street Address (P.O. Box Number is Not Acceptable) 33 ALHAMBRA CIRCLE # 11	
City CORAL GABLES	Zip Code 33134

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

January 1 - May 1, Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25

9. Election Campaign Financing \$5.00 May Be Added to Fees
Trust Fund Contribution.

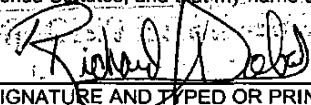
Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

11.

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PR DIR RICHARD DOBAL 33 ALHAMBRA CIRCL # 11 CORAL GABLES FL 33134-4633	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 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 on an attachment with an address, with all other like empowered.

SIGNATURE:  RICHARD DOBAL **4/12/2005** **305-529-5402**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #