2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000087448

Entity Name: AZIENDA DESIGN, CORP.

FILED Apr 21, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2657 NE 189TH TERRACE 333 N NEW RIVER DR. EAST AVENTURA, FL 33180

SUITE 1200

FORT LAUDERDALE, FL 33301

Current Mailing Address: New Mailing Address:

2657 NE 189TH TERRACE 333 N NEW RIVER DR. EAST

AVENTURA, FL 33180 SUITE 1200

FORT LAUDERDALE, FL 33301

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

LEISERSON, RAQUEL L CABRAL, ALEX

3784 NE 209TH TERRACE 333 N NÉW RIVER DR. EAST

AVENTURA, FL 33180 SUITE 1200

FORT LAUDERDALE, FL 33301 US

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: ALEX CABRAL 04/21/2006

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

LEISERSON, RAQUEL L CABRAL, ALEXANDRE Name: Name:

3784 NE 209TH TERRACE 333 N NEW RIVER DR. EAST SUITE # 1200 Address: Address:

City-St-Zip: AVENTURA, FL 33180 City-St-Zip: FORT LAUDERDALE, FL 33301

VSD Title: VSD (X) Change () Addition Title: () Delete Name: WOLYNIEC, DANIELA P Name: WOLYNIEC, DANIELA P

3115 NE 184TH STREET #4206 333 N NEW RIVER DR. EAST SUITE # 1200 Address: Address:

AVENTURA, FL 33160 FORT LAUDERDALE, FL 33301 City-St-Zip: City-St-Zip:

Title: (X) Change () Addition Title: () Delete TD

CABRAL, ALEXANDRE Name: CABRAL, ALEXANDRE Name:

4415 E. WHITEWATER AVENUE 333 N NEW RIVER DR. EAST SUITE # 1200 Address: Address:

City-St-Zip: WESTON, FL 333322416 City-St-Zip: FORT LAUDERDALE, FL 33301

I hereby certify that the information supplied with this filing does not qualify for the 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: ALEX CABRAL PD 04/21/2006