2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000112665

Entity Name: C.D.B. PRODUCTIONS GROUP INC.

FILED Mar 29, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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6392 NW 84 AVE DORAL, FL 33166

Current Mailing Address: New Mailing Address:

6392 NW 84 AVE DORAL, FL 33166

FEI Number: 55-0878443 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

VELASQUEZ, SILVIA R
6392 NW 84 AVE
DORAL, FL 33166 US

VELASQUEZ, JORGE H
6392 NW 84 AVE
DORAL, FL 33166 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: GLORIA VELASQUEZ 03/29/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition
Name: VELASQUEZ, SILVIA R Name: VELASQUEZ, JORGE H

 Name:
 VELASQUEZ, SILVIA R
 Name:
 VELASQUEZ, JORGE

 Address:
 6392 NW 84 AVE
 Address:
 10328 SW 19 ST

 City-St-Zip:
 DORAL, FL 33166
 City-St-Zip:
 MIRAMAR, FL 33025

Title: VP () Delete Title: VP (X) Change () Addition Name: VELASQUEZ, JORGE H Name: VELASQUEZ, GLORIA E

 Name:
 VELASQUEZ, JORGE H
 Name:
 VELASQUEZ, GLORIA E

 Address:
 6392 NW 84 AVE
 Address:
 6400 SW 138 CT N 202

 City-St-Zip:
 DORAL, FL 33166
 City-St-Zip:
 MIAMI, FL 33183

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

 Name:
 VELASQUEZ, GLORIA
 Name:

 Address:
 6392 NW 84 AVE
 Address:

 City-St-Zip:
 DORAL, FL 33166
 City-St-Zip:

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: GLORIA VELASQUEZ V 03/29/2006