

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000138141

Entity Name: NUEVA DIA, INC.

FILED
Mar 30, 2006
Secretary of State

Current Principal Place of Business:

1643 BRICKELL AVENUE
SUITE 4101
MIAMI, FL 33129

New Principal Place of Business:

Current Mailing Address:

1643 BRICKELL AVENUE
SUITE 4101
MIAMI, FL 33129

New Mailing Address:

FEI Number: 20-1713443 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPDIRECT AGENTS, INC.
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: VALENCIA, JOSE A
Address: 1643 BRICKELL AVENUE, SUITE 4101
City-St-Zip: MIAMI, FL 33129

Title: S (X) Delete
Name: MENENDEZ-CAMBO, PATRICIA
Address: 1221 BRICKELL AVENUE
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change () Addition
Name: VALENCIA, JOSE A
Address: 1643 BRICKELL AVENUE, SUITE 4101
City-St-Zip: MIAMI, FL 33129

Title: () Change () Addition
Name:
Address:
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: JOSE A. VALENCIA

P

03/30/2006

Electronic Signature of Signing Officer or Director

_____ Date