

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 07, 2006 8:00 am
Secretary of State

03-13-2006 90081 006 ***150.00

DOCUMENT # P05000044007 1. Entity Name NANO HEAD FILMS, INC.			
Principal Place of Business 700 BILTMORE WAY #617 CORAL GABLES FL 33134		Mailing Address 700 BILTMORE WAY #617 CORAL GABLES FL 33134	
2. Principal Place of Business 3000 BIRD AVE.		3. Mailing Address 3000 BIRD AVE.	
Suite, Apt. #, etc. #6		Suite, Apt. #, etc. #6	
City & State MIAMI, FL		City & State MIAMI FL	
Zip 33133 Country USA		Zip 33133 Country USA	
4. FEI Number 20-2160697		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent RECIO, DAN 700 BILTMORE WAY #617 CORAL GABLES FL 33134		7. Name and Address of New Registered Agent Name RECIO, DAN Street Address (P.O. Box Number is Not Acceptable) 3000 BIRD AVE. #6 City MIAMI State FL Zip Code 33133	
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 _____ (NOTE: Registered Agent signature required when reappointing) DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee Will Be \$550.00 Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST RECIO, DAN 700 BILTMORE WAY #617 CORAL GABLES FL 33134	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RECIO, DAN 700 BILTMORE WAY #617 CORAL GABLES FL 33134	☐ Delete	(SAME) 7000 BIRD AVE #6 MIAMI, FL 33133
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition	(SAME) 7000 BIRD AVE #6 MIAMI, FL 33133
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	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 exemptions contained in Section 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.			
SIGNATURE: _____ DAN RECIO		2/28/06 305-818-7303	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	