## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000081965

Entity Name: WOLFF RECORDS, INC.

FILED Feb 09, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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100 SE SECOND STREET SUITE 3300 1000 EAST ISLAND BLVD. MIAMI, FL 33131 WILLIAMS ISLAND ,SUITE 3110

AVENTURA, FL 33160

Current Mailing Address: New Mailing Address:

100 SE SECOND STREET SUITE 3300 1000 EAST ISLAND BLVD.
MIAMI, FL 33131 WILLIAMS ISLAND, SUITE 3110
AVENTURA, FL 33160

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

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

WOLFE & GOLDSTEN PA WOLFF, MARK J
100 SE SECOND STREET SUITE 3300 126 GULFVIEW DRIVE

MIAMI, FL 33131 US ISLAMORADA, FL 33036 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: MARK J.WOLFF 02/09/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 WOLFF, MARK J JR
 Name:

 Address:
 6812 SW 78TH TERR
 Address:

 City-St-Zip:
 MIAMI, FL 33143
 City-St-Zip:

Title: DV ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 GONZALEZ, CALEB
 Name:

 Address:
 9765 SW 15TH STREET EFF
 Address:

 City-St-Zip:
 MIAMI, FL 33174
 City-St-Zip:

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

 Name:
 REYES, DORIAN
 Name:
 REYES, DORIAN

 Address:
 5140 SW 98TH AVE RD
 Address:
 5140 SW 98TH AVE RD

 City-St-Zip:
 MIAMI, FL 33165
 City-St-Zip:
 MIAMI, FL 33165

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

 Name:
 Name:
 WOLFF, MARK J

 Address:
 Address:
 126 GULFVIEW DRIVE

 City-St-Zip:
 City-St-Zip:
 ISLAMORADA, FL 33036

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: MARK J. WOLFF S 02/09/2006