

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000128880

Entity Name: ABSOLUTT EVENTS, INC

FILED
Apr 29, 2006
Secretary of State

Current Principal Place of Business:

6825 NW 173RD DRIVE
108
HIALEAH, FL 33015

New Principal Place of Business:

Current Mailing Address:

6825 NW 173RD DRIVE
108
HIALEAH, FL 33015

New Mailing Address:

FEI Number: 20-3481987

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VNZ CONSULTING
2700 GLADES CIRCLE
SUITE 137
WESTON, FL 33327 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: SISO, BEATRIZ A
Address: 6825 NW 173RD DRIVE #108
City-St-Zip: HIALEAH, FL 33015

Title: VP () Delete
Name: COLIMODIO, JUDITH
Address: 6825 NW 173RD DRIVE # 108
City-St-Zip: HIALEAH, FL 33015

Title: VP () Delete
Name: SUAREZ, RAFAEL
Address: 8551 NW 141 TERRACE # 303
City-St-Zip: HIALEAH, FL 33015

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: BEATRIZ SISO

P

04/29/2006

Electronic Signature of Signing Officer or Director

Date