

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000146519

Entity Name: ALEGRIA ENTERTAINMENT, INC

FILED  
May 03, 2006  
Secretary of State

## Current Principal Place of Business:

20533 BISCAYNE BLVD  
264  
AVENTURA, FL 33180

## New Principal Place of Business:

## Current Mailing Address:

20533 BISCAYNE BLVD  
264  
AVENTURA, FL 33180

## New Mailing Address:

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

## Name and Address of Current Registered Agent:

CARAVAGIO, VICTOR  
20533 BISCAYNE BLVD  
264  
AVENTURA, FL 33180 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: EDER, JOY  
Address: 20533 BISCAYNE BLVD # 264  
City-St-Zip: AVENTURA, FL 33180

Title: VP ( ) Delete  
Name: EDER, STEVEN  
Address: 20533 BISCAYNE BLVD # 264  
City-St-Zip: AVENTURA, FL 33180

Title: SECT ( ) Delete  
Name: CARAVAGIO, VICTOR  
Address: 20533 BISCAYNE BLVD # 264  
City-St-Zip: AVENTURA, FL 33180

## 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: JOY EDER

P

05/03/2006

Electronic Signature of Signing Officer or Director

Date