## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000013723

Entity Name: PARTY DREAM WORKS, INC.

FILED Apr 30, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
--------------------------------------	----------------------------------

7570 NW 186TH STREET 6933 NW 173RD DRIVE 201 L-108

MIAMI, FL 33015 HIALEAH, FL 33015

Current Mailing Address: New Mailing Address:

7570 NW 186TH STREET 6933 NW 173RD DRIVE 201 L-108
MIAMI, FL 33015 HIALEAH, FL 33015

FEI Number: 20-4237819 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

 SANTELICES, JONTUE
 SANTELICES, JONTUE

 7570 NW 186TH STREET
 6933 NW 173RD DRIVE

 201
 L-108

 MIAMI, FL 33015 US
 HIALEAH, FL 33015 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: JONTUE SANTELICES 04/30/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P ( ) Delete
 Title:
 ( ) Change ( ) Addition

 Name:
 HERRERA, LYNETTE
 Name:

 Address:
 9005 NW 174 LANE
 Address:

 City-St-Zip:
 MIAMI, FL 33018
 City-St-Zip:

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

 Name:
 SANTELICES, JONTUE
 Name:
 SANTELICES, JONTUE

 Address:
 7570 NW 186TH STREET # 201
 Address:
 6933 NW 173RD DRIVE #L-108

 City-St-Zip:
 MIAMI, FL 33015
 City-St-Zip:
 HIALEAH, FL 33015

I hereby certify that the information supplied with this filing does not qualify 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: JONTUE SANTELICES P 04/30/2007