## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P08000103858

Entity Name: EUROCARIBE PRODUCTIONS, INC.

FILED Jun 05, 2009 Secretary of State

13006 SW 190 ST. 429 LENOX AV. MIAMI, FL 33177 5W08

MIAMI, FL 33139

Current Mailing Address: New Mailing Address:

13006 SW 190 ST. 429 LENOX AV. MIAMI, FL 33177 5W08

MIAMI, FL 33139

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:

DOS SANTOS, VERONICA 13006 SW 190 ST MIAMI, FL 33177 US LOZANO, ISRAEL 429 LENOX AV SUITE 5W08. MIAMI, FL 33177 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: ISRAEL LOZANO 06/05/2009

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:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Name:
 MORIN, JOSE L
 Name:
 MANZANO, MARIA

 Address:
 13006 SW 190 ST.
 Address:
 429 LENOX AV SUITE 5W08.

City-St-Zip: MIAMI, FL 33177 City-St-Zip: MIAMI, FL 33139

Title: D ( ) Delete Title: D (X) Change ( ) Addition
Name: MANZANO GUZMAN. MARIA Name: LOZANO. ISRAEL

 Name:
 MANZANO GUZMAN, MARIA
 Name:
 LOZANO, ISRAEL

 Address:
 13006 SW 190 ST.
 Address:
 429 LENOX AV SUITE 5W08.

City-St-Zip: MIAMI, FL 33131 City-St-Zip: MIAMI, FL 33139

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

 Name:
 DE LEON, DANIEL
 Name:

 Address:
 13006 SW 190 ST.
 Address:

 City-St-Zip:
 MIAMI, FL 33177
 City-St-Zip:

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

 Name:
 LOZANO GOMEZ, ISRAEL
 Name:

 Address:
 13006 SW 190 ST.
 Address:

 City-St-Zip:
 MIAMI, FL 33131
 City-St-Zip:

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: ISRAEL LOZANO D 06/05/2009