

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000022855

FILED
Apr 29, 2006
Secretary of State

Entity Name: DIAZ-AMADOR PRODUCTIONS, INC.

Current Principal Place of Business:

6215 W. 20TH AVE.
SUITE 405
HIALEAH, FL 33012

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 522163
MIAMI, FL 331522163 US

New Mailing Address:

FEI Number: 65-0479651 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DIAZ-AMADOR, JORGE O
6215 W. 20TH AVE. STE. 405
HIALEAH, FL 33012 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: D () Delete
Name: DIAZ-AMADOR, JORGE O
Address: 6215 W. 20TH AVE. STE. 405
City-St-Zip: HIALEAH, FL 33012

Title: D () Delete
Name: DIAZ-AMADOR, ORLANDO
Address: 6215 W. 20TH AVE. STE. 405
City-St-Zip: HIALEAH, FL 33012

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: DIAZ-AMADOR, ORLANDO
Address: 10820 NE 11TH COURT
City-St-Zip: MIAMI, FL 33161

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: JORGE DIAZ-AMADOR

D

04/29/2006

Electronic Signature of Signing Officer or Director

_____ Date