... 2006 FOR PROFIT CORPORATION

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

Aug 01, 2006 8:00 am **ANNUAL REPORT** Secretary of State **DOCUMENT # P97000079875** 08-01-2006 90003 025 ***158.75 MADI ENTERPRISES, INC. Principal Place of Business Mailing Address 50023763 2151 N.W. 93RD AVENUE 2151 N.W. 93RD AVENUE MIAMI, FL 33172 MIAMI, FL 33172 07262006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0796958 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent PESANT, GUILLERMO DO NOT WRITE 1313 PONCE DE LEON BLVD. **SUITE 301** IN THIS SPACE CORAL GABLES, FL 33134 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agont and title it applicable (NOTE: Registered Agent signeture required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 In accordance with s. 607.193(2)(b), F.S., the Due by September 6, 2006 Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. 10. OFFICERS AND DIRECTORS PD TITLE MADIEDO, REYNALDO NAME STREET ADDRESS 2151 N.W. 93RD AVENUE CITY-ST-ZIP MIAMI, FL 33172 VPD IIILE MADIEDO, REYNALDO # STREET ADDRESS 2151 N.W. 93RD AVENUE CITY-ST-ZIP MIAMI, FL 33172 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP FITLE NAME STREET ADDRESS

FILED

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

do Madiedo# 7 SIGNATURE: