2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P98000062026

Entity Name: MENADA, INC.

FILED Jul 19, 2006 Secretary of State

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

5101 COLLINS AVENUE 5101 COLLINS AVENUE MIAMI BEACH, FL 33140 MANAGEMENT OFFICE MIAMI BEACH, FL 33140

Current Mailing Address: New Mailing Address:

5101 COLLINS AVENUE 5101 COLLINS AVENUE MIAMI BEACH, FL 33140 MANAGEMENT OFFICE MIAMI BEACH, FL 33140

FEI Number: 69-0850241 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:

CAMPOS, JUAN C LEGAL C
6701 COLLINS AVENUE
555 N.E. 15TH STREET
ST. JULIEN ROOM
MIAMI BEACH, FL 33141 US
SARETSKY, LOUIS D
555 N.E. 15TH STREET
SUITE 100
MIAMI, FL 33132 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: LOUIS D. ZARETSKY 07/19/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Name: CASTRO, ANTONIO J V, CFO Name: MERUELO, HOMERO SR
Address: 6701 COLLINS AVENUE Address: 5101 COLLINS AVENUE, MANAGEMENT OFFICE

City-St-Zip: MIAMI BEACH, FL 33141 US City-St-Zip: MIAMI BEACH, FL 33140

Title: VDS () Delete Title: VD (X) Change () Addition Name: MERUELO, BELINDA VDS Name: MERUELO, RICHARD

Address: 6701 COLLINS AVE. Address: 5101 COLLINS AVENUE, MANAGEMENT OFFICE

City-St-Zip: MIAMI BEACH, FL 33141 City-St-Zip: MIAMI BEACH, FL 33140

 $\label{eq:title: Title: STD (X) Change () Addition} \end{Title: STD (X) Change () Addition}$

 Name:
 MERUELO, HOMERO P,D
 Name:
 MERUELO, BELINDA

 Address:
 6701 COLLINS AVE.
 Address:
 5101 COLLINS AVENUE

 City-St-Zip:
 MIAMI BEACH, FL 33141
 City-St-Zip:
 MIAMI BEACH, FL 33140

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: HOMERO MERUELO, SR. PD 07/19/2006