## 2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P98000072217

Entity Name: MACAMBU, INC.

FILED May 05, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 10841 NW 48 LN MIAMI, FL 33178 US **Current Mailing Address: New Mailing Address:** 10841 NW 48 LN MIAMI, FL 33178 US FEI Number: 65-0871521 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: RD GLOBAL CONSULTING, INC 200 S. BISCAYNE BLVD SUITE 830 MIAMI, FL 33131 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PVD () Delete Title: (X) Change ( ) Addition DOMINGO, CARLOS A DELGADO FILARDO, LUIS Name: Name: 10841 NW 48 LN 10841 NW 48 LN Address: Address: City-St-Zip: MIAMI, FL 33178 US City-St-Zip: MIAMI, FL 33178 US Title: Title: VΡ ( ) Change (X) Addition ( ) Delete Name: Name: BOLANOS DE DELGADO, GISELA C 10841 NW 48 LN Address: Address: MIAMI, FL 33178 US City-St-Zip: City-St-Zip: Title: Title: () Delete ( ) Change (X) Addition DELGADO DE DOMINGO, MARISELA Name: Name: 10841 NW 48I N Address Address: City-St-Zip: City-St-Zip: MIAMI, FL 33178 US Title: () Delete Title: ( ) Change (X) Addition DELGADO BOLANOS, MARIA E Name: Name: Address: Address: 10841 NW 48 LN City-St-Zip: City-St-Zip: MIAMI, FL 33178 US Title: Title: ( ) Change (X) Addition ( ) Delete DELGADO BOLANOS, JOSE L Name: Name: Address: Address: 10841 NW 48 LN City-St-Zip: City-St-Zip: MIAMI, FL 33178 US Title: () Delete Title: ( ) Change (X) Addition DELGADO DE CELIS, MARIA I Name: Name: 10841 NW 48 LN Address: Address: City-St-Zip: City-St-Zip: MIAMI, FL 33178 US

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: LUIS DELGADO FILARDO P 05/05/2006