

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000000600

FILED
Apr 23, 2006
Secretary of State

Entity Name: MOVIE, TELEVISION, & GRAPHICS CORP.

Current Principal Place of Business:

5600 SOUTH WEST 135TH AVE.
SUITE 112
MIAMI, FL 33183

New Principal Place of Business:

Current Mailing Address:

5600 SOUTH WEST 135TH AVE.
SUITE 112
MIAMI, FL 33183

New Mailing Address:

FEI Number: 65-0886796 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES, FL 33134 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: PD () Delete
Name: JARAMILLO, JOSE
Address: P.O. BOX 592665
City-St-Zip: MIAMI, FL 33159

Title: SD () Delete
Name: CASAS, GABRIEL F
Address: P.O. BOX 592665
City-St-Zip: MIAMI, FL 33159

Title: VD () Delete
Name: CASAS, GABRIEL F
Address: P.O. BOX 592665
City-St-Zip: MIAMI, FL 33159

Title: TD () Delete
Name: CHALMETA, JULIO
Address: P.O. BOX 592665
City-St-Zip: MIAMI, FL 33159

Title: D () Delete
Name: GENTILE, MICHELLE
Address: P.O. BOX 592665
City-St-Zip: MIAMI, FL 33159

Title: D () Delete
Name: GENTILE, MIRIAM P
Address: P.O. BOX 592665
City-St-Zip: MIAMI, FL 33159

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

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: JOSE JARAMILLO

PD

04/23/2006

Electronic Signature of Signing Officer or Director

_____ Date