

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000060382

Entity Name: SIXANGEL PRODUCTION CORP.

FILED
Apr 18, 2005
Secretary of State

Current Principal Place of Business:

2776 DEL CREST DR.
ORLANDO, FL 32817

New Principal Place of Business:

Current Mailing Address:

P.O BOX 678737
ORLANDO, FL 32867

New Mailing Address:

FEI Number: 59-3640185

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOLINA, JULIO
8614 BRACKENWOOD DR.
ORLANDO, FL 32829 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: CUEVAS, SIXTO
Address: 2776 DEL CREST DR.
City-St-Zip: ORLANDO, FL 32817

Title: O () Delete
Name: CUEVAS, SIXTO JR.
Address: 5349 COMMANDER DR #306
City-St-Zip: ORLANDO, FL 32822

Title: O (X) Delete
Name: CUEVAS, ABDY
Address: 5349 COMMANDER DR #306
City-St-Zip: ORLANDO, FL 32822

Title: O (X) Delete
Name: CUEVAS, RIUS
Address: 5349 COMMANDER DR #306
City-St-Zip: ORLANDO, FL 32822

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: MENDEZ, ANGEL R MR
Address: 3308 CLAY AVE #4
City-St-Zip: ORLANDO, FL 32804

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 Section 119.07(3)(i), 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: ANGEL R. MENDEZ

D

04/18/2005

Electronic Signature of Signing Officer or Director

Date