

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000087499

FILED
Apr 15, 2008
Secretary of State

Entity Name: ANDROMEDA PRODUCTIONS INC.

Current Principal Place of Business:

201 ALHAMBRA CIRCLE
SUITE #502
CORAL GABLES, FL 33134

New Principal Place of Business:

2100 PONCE DE LEON BLVD.
1178
CORAL GABLES, FL 33134

Current Mailing Address:

201 ALHAMBRA CIRCLE
SUITE #502
CORAL GABLES, FL 33134

New Mailing Address:

2100 PONCE DE LEON BLVD.
1178
CORAL GABLES, FL 33134

FEI Number: 65-0998259

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUERTA, EMILIA A
201 ALHAMBRA CIRCLE
SUITE #502
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

HUERTA, EMILIA M
2100 PONCE DE LEON BLVD.
1178
CORAL GABLES, FL 33134 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: EMILIA M. HUETRA

04/15/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VPTD () Delete
Name: HUERTA, CARLOS A
Address: 201 ALHAMBRA CIRCLE #502
City-St-Zip: CORAL GABLES, FL 33134

Title: PSD () Delete
Name: HUERTA, EMILIA M
Address: 201 ALHAMBRA CIRCLE #502
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPTD (X) Change () Addition
Name: HUERTA, CARLOS A
Address: 2100 PONCE DE LEON BLVD. #1178
City-St-Zip: CORAL GABLES, FL 33134

Title: PSD (X) Change () Addition
Name: HUERTA, EMILIA M
Address: 2100 PONCE DE LEON BLVD. #1178
City-St-Zip: CORAL GABLES, FL 33134

I hereby certify that the information supplied with this filing does not qualify 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: EMILIA M. HUERTA

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04/15/2008

Electronic Signature of Signing Officer or Director

Date