

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S69433

**FILED**  
**Aug 25, 2006**  
**Secretary of State**

**Entity Name:** STUDIO 23 ANORANZAS, INC.

**Current Principal Place of Business:**

235 23 ST  
MIAMI BEACH, FL 33139 US

**New Principal Place of Business:**

1436 SEMORAN BLVD SUITE 1064  
CASSELBERRY, FL 32707 US

**Current Mailing Address:**

235 23ST  
MIAMI BEACH, FL 331391713 US

**New Mailing Address:**

1436 SEMORAN BLVD SUITE 1064  
CASSELBERRY, FL 32707 US

FEI Number: 65-0279042

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ALARCON, HECTOR  
235 23 STREET  
MIAMI BEACH, FL 33139 US

**Name and Address of New Registered Agent:**

ALARCON, HECTOR  
1436 SEMORAN BLVD SUITE 1064  
CASSELBERRY, FL 32707 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

08/25/2006

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PDS ( ) Delete  
Name: ALARCON, HECTOR  
Address: 235 23 STREET  
City-St-Zip: MIAMI BEACH, FL 33139

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PDS (X) Change ( ) Addition  
Name: ALARCON, HECTOR  
Address: 1436 SEMORAN BLVD SUITE 1064  
City-St-Zip: CASSELBERRY, FL 32707

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: HECTOR ALARCON

Electronic Signature of Signing Officer or Director

PRES

08/25/2006

Date