


**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 13, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # P03000149642**  
 1. Entity Name  
**BECARRO INTERNATIONAL CORPORATION**



Principal Place of Business      Mailing Address  
**1730 CORPORATE DRIVE**      **1730 CORPORATE DRIVE**  
**BOYNTON BEACH, FL 33426**      **BOYNTON BEACH, FL 33426**

**DO NOT WRITE IN THIS SPACE**



04102006    No Chg-P    CR2E034 (11/05)

4. FEI Number      Applied For  
**20-0462685**      Not Applicable

5. Certificate of Status Desired        **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent  
**CAMCHE, ROBERT**  
**1730 CORPORATE DRIVE**  
**BOYNTON BEACH, FL 33426**

**DO NOT WRITE IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable      (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.        **\$5.00** May Be Added to Fees

11000010506278  
 04/27/06-80017-003 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PRES CAMCHE, GLENN 219 BAYBERRY LANE WESTPORT, CT 06880
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP CAMCHE, ROBERT 4603 WINDWARD COVE LANE LAKE WORTH, FL 33467
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE *[Handwritten Signature]*      DATE *[Handwritten Date]*