


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 26, 2008 08:00 AM
Secretary of State

DOCUMENT # P03000149642

1. Entity Name
BECARRO INTERNATIONAL CORPORATION



Principal Place of Business 1730 CORPORATE DRIVE BOYNTON BEACH, FL 33426	Mailing Address 1730 CORPORATE DRIVE BOYNTON BEACH, FL 33426
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DO NOT WRITE IN THIS SPACE



03242008 No Chg-P CR2E034 (11/05)

4. FEI Number 20-0462685	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

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

000000970520
 04/09/08-80094-012 150.00

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	
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: *Robert Camche* **3/24/08** (561) 737-8585

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #