

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000020178

FILED  
Apr 26, 2006  
Secretary of State

**Entity Name:** CORCOVADO INTERNATIONAL CORP.

**Current Principal Place of Business:**

2101 BRICKELL AVENUE  
2603  
MIAMI, FL 33129 US

**New Principal Place of Business:**

**Current Mailing Address:**

2101 BRICKELL AVENUE  
2603  
MIAMI, FL 33129 US

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

GONZALEZ, ERIC A ESQ.  
7050 SW 86 AVENUE  
MIAMI, FL 33143 US

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

PARLADE, ALBERTO J ESQ.  
7050 SW 86 AVENUE  
MIAMI, FL 33143 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: ALBERTO J. PARLADE, ESQ. 04/26/2006  
\_\_\_\_\_  
Electronic Signature of Registered Agent Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P (X) Delete  
Name: SCARVACI, GAETANO  
Address: 2101 BRICKELL AVENUE, SUITE 2603  
City-St-Zip: MIAMI, FL 33129 US

Title: VP ( ) Delete  
Name: ROME, ANTONELLA  
Address: 2101 BRICKELL AVENUE, SUITE 2603  
City-St-Zip: MIAMI, FL 33129 US

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

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

Title: PTS (X) Change ( ) Addition  
Name: ROME, ANTONELLA  
Address: 2101 BRICKELL AVENUE, SUITE 2603  
City-St-Zip: MIAMI, FL 33129 US

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: ANTONELLA ROME PTS 04/26/2006  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director Date