

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S04906

FILED
Feb 22, 2006
Secretary of State

Entity Name: TECNORAVIA INTERNATIONAL CORPORATION

Current Principal Place of Business:

848 BRICKELL AVE.
SUITE 950
MIAMI, FL 33131 US

New Principal Place of Business:

Current Mailing Address:

848 BRICKELL AVENUE
SUITE 950
MIAMI, FL 33131 US

New Mailing Address:

FEI Number: 65-0221731 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BENITEZ, ALBERTO
848 BRICKELL AVENUE SUITE 950
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: FIDALGO, EDWARD M
Address: 848 BRICKELL AVENUE, SUITE 950
City-St-Zip: MIAMI, FL

Title: DV () Delete
Name: CAMERO, OMAR GERARDO,
Address: 848 BRICKELL AVENUE, SUITE 950
City-St-Zip: MIAMI, FL

Title: DV () Delete
Name: CAMERO, MARTIN N.,
Address: 848 BRICKELL AVENUE, SUITE 950
City-St-Zip: MIAMI, FL

Title: STD () Delete
Name: CAMERO FIDALGO, LUIS, A
Address: 848 BRICKELL AVENUE, SUITE 950
City-St-Zip: MIAMI, FL

Title: DV () Delete
Name: CAMERO, OMAR
Address: 848 BRICKELL AVENUE, SUITE 950
City-St-Zip: MIAMI, FL

Title: V () Delete
Name: ROJAS, ARTURO A
Address: 848 BRICKELL AVE, SUITE 950
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

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: ARTURO ROJAS

V

02/22/2006

Electronic Signature of Signing Officer or Director

Date