

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 25, 2008 08
Secretary of

DOCUMENT # P99000086171 1. Entity Name RAICO INTERNATIONAL CORP.	
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Principal Place of Business 7792 NW 71 STREET MIAMI, FL 33166	Mailing Address 780 NW 42 AVE # 416 MIAMI, FL 33126
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02022008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0950814	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**CORDOVA, ANGEL D
780 NW 42ND AVE
#416
MIAMI, FL 33126**

**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 _____
Signature, typed or printed name of registered agent and title if applicable (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

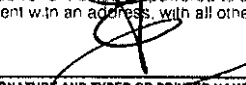
10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP NOGUEZ, JULIO L COMESANA 4460 CP B1702 BOD CIUADELA, BUENOS AIRES, AG
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVS NOGUES, ERNESTO COMESANA 4460 CP B1702 BOD CIUADELA, BUENOS AIRES, AG
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP NOGUES, GASTON COMESANA 4460 CP B1702 BOD CIUADELA, BUENOS AIRES, AG
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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03/04/08-80063-010 150.00

**DO NOT WRITE
IN THIS SPACE**

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, or 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: **X**  **ERNESTO NOGUES** DIR. **02-02-08**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #