

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L69731

Entity Name: FAMECO INCORPORATED

FILED  
May 21, 2007  
Secretary of State

**Current Principal Place of Business:**

2 SOUTH BISCAYNE BLVD.  
#3400  
MIAMI, FL 33131

**New Principal Place of Business:**

2 SOUTH BISCAYNE BLVD.  
#3400  
MIAMI, FL 33131

**Current Mailing Address:**

**New Mailing Address:**

FEI Number: 65-0192953      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

GY CORPORATE SERVICES , INC  
2 S. BISCAYNE BLVD., SUITE 3400  
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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: RAMIREZ, JUAN B  
Address: SAN RAMON  
City-St-Zip: ALAJUELA, COSTA RICA,

Title: DV ( ) Delete  
Name: RAMIREZ, GERARDO  
Address: LA URUCA,  
City-St-Zip: SAN JOSE, COSTA RICA,

Title: DV ( ) Delete  
Name: RAMIREZ, MARIANO  
Address: CIUDAD CARARI  
City-St-Zip: HEREDIA, COSTA RICA,

Title: DS ( ) Delete  
Name: RAMIREZ, OSCAR  
Address: ROHRMOSER,  
City-St-Zip: SAN JOSE, COSTA RICA,

Title: DT ( ) Delete  
Name: RAMIREZ, MIGUEL  
Address: ROHRMOSER  
City-St-Zip: ALAJUELA, COSTA RICA,

**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:

I hereby certify that the information supplied with this filing does not qualify 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: JUAN B. RAMIREZ

P

05/21/2007

Electronic Signature of Signing Officer or Director

Date