



Apr 20, 2007 0
Secretary of

DOCUMENT # P02000083962 1. Entity Name BOCADELE CORP.		
Principal Place of Business 1390 BRICKELL AVENUE SUITE 200 MIAMI, FL 33131		Mailing Address 1390 BRICKELL AVENUE SUITE 200 MIAMI, FL 33131
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent CASTILLO B, ALVARO 1390 BRICKELL AVENUE SUITE 200 MIAMI, FL 33131		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 renewing) Signature, typed or printed name of registered agent and title if applicable. DATE _____		
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DE HOFFMANN, HUGO A 1390 BRICKELL AVENUE SUITE 200 MIAMI, FL 33131	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FLEISCHHEKER, CINTHYA M 1390 BRICKELL AVENUE SUITE 200 MIAMI, FL 33131	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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:  HUGO A DE HOFFMANN DIRECTOR		4/16/07 786-224-1905
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #



04152007 No Chg-P CR2E034 (11/05)

4. FEI Number
43-1970772 Applied For
Not Applicable5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required****DO NOT WRITE
IN THIS SPACE**U000000719675
05/01/07-80071-023 150.00