

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000033405

Entity Name: CONVECA, INC.

FILED  
Jan 09, 2007  
Secretary of State

## Current Principal Place of Business:

6312 NW 97 AVE  
MIAMI, FL 33178

## New Principal Place of Business:

## Current Mailing Address:

6312 NW 97 AVE  
MIAMI, FL 33178

## New Mailing Address:

FEI Number: 16-1660108

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BURNS, RICHARD ESQ  
1500 NW 107TH AVE, STE 200  
MIAMI, FL 33172 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: P ( ) Delete  
Name: BASSO, RENSO  
Address: 6312 NW 97 AVE  
City-St-Zip: MIAMI, FL 33178

Title: V ( ) Delete  
Name: BASSO, GIUSEPPE  
Address: 6312 NW 97 AVE  
City-St-Zip: MIAMI, FL 33178

Title: V ( ) Delete  
Name: WELSCH, PAUL  
Address: 6312 NW 97 AVE  
City-St-Zip: MIAMI, FL 33178

Title: S ( ) Delete  
Name: BASSO, GABRIELLA  
Address: 6312 NW 97 AVE  
City-St-Zip: MIAMI, FL 33178

Title: D ( ) Delete  
Name: BASSO, ANNA M  
Address: 6312 NW 97 AVE  
City-St-Zip: MIAMI, FL 33178

## 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 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: PAUL WELSCH

GM

01/09/2007

Electronic Signature of Signing Officer or Director

Date