

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000095505

FILED  
Mar 06, 2008  
Secretary of State

Entity Name: BRASCARE IMPORT & EXPORT, CORP.

## Current Principal Place of Business:

5401 COLLINS AVE. #CU-11D  
MIAMI BEACH, FL 33140 US

## New Principal Place of Business:

2814 COLLINS AVE. UNIT # A  
MIAMI BEACH, FL 33140 US

## Current Mailing Address:

5401 COLLINS AVE. #CU-11D  
MIAMI BEACH, FL 33140 US

## New Mailing Address:

2814 COLLINS AVE. UNIT # A  
MIAMI BEACH, FL 33140 US

FEI Number: 20-3114457

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TAX HOUSE CORPORATION  
1261 E SAMPLE RD  
POMPNAO BEACH, FL 33064 US

## Name and Address of New Registered Agent:

TAX HOUSE CORPORATION  
1100 S FEDERAL HWY  
DEERDEILED BEACH, FL 33441 US

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: TAX HOUSE

03/06/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: RODRIGUEZ, LINDINALVA S  
Address: 11905 NE 2ND AVENUE APT C-311  
City-St-Zip: NORTH MIAMI, FL 33161 US

Title: VD ( ) Delete  
Name: OLIVEIRA, JUCIARA P  
Address: 11905 NE 2ND AVENUE APT C-311  
City-St-Zip: NORTH MIAMI, FL 33161 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD (X) Change ( ) Addition  
Name: OLIVEIRA, JUCIARA P  
Address: 5401 COLLINS AVE APT 1011  
City-St-Zip: MIAMI BEACH, FL 33140 US

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: LINDINALVA

PD

03/06/2008

Electronic Signature of Signing Officer or Director

Date