2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000046943

Entity Name: KROCUS, CORP.

FILED Feb 08, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

4623 NW 97 CRT DORAL 4140 FOREST DRIVE MIAMI, FL 33178 FL WESTON, FL 33332 FL

Current Mailing Address: New Mailing Address:

11010 NW 30TH ST 104 COL10005 MIAMI, FL 33172 FL

FEI Number: 20-4624527 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

RAMIREZ, ANDRES F
4623 NW 97 CRT DORAL
MIAMI, FL FL33178 US

RAMIREZ, ANDRES F
4140 FOREST DRIVE
WESTON, FL FL33332 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: ANDRES F RAMIREZ 02/08/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: MARTINEZ, LUIS F Name: MARTINEZ, LUIS F

 Address:
 4623 NW 97 CRT DORAL
 Address:
 4140 FOREST DRIVE

 City-St-Zip:
 MIAMI, FL 33178 FL
 City-St-Zip:
 WESTON, FL 33332 FL

Title: VP () Delete Title: VP (X) Change () Addition Name: RAMIREZ, IVAN D Name: RAMIREZ, IVAN D

 Name:
 RAMIREZ, IVAN D
 Name:
 RAMIREZ, IVAN D

 Address:
 4623 NW 97 CRT DORAL
 Address:
 4140 FOREST DRIVE

 City-St-Zip:
 MIAMI, FL 33178 FL
 City-St-Zip:
 WESTON, FL 33332 FL

Title: () Delete Title: SV () Change (X) Addition

 Name:
 Name:
 MARTINEZ, LUIS F

 Address:
 Address:
 4140 FOREST DRIVE

 City-St-Zip:
 City-St-Zip:
 WESTON, FL 33332 FL

Title: () Delete Title: PV () Change (X) Addition

 Name:
 Name:
 MARTINEZ, JUAN F

 Address:
 Address:
 4140 FOREST DRIVE

 City-St-Zip:
 City-St-Zip:
 WESTON, FL 33332 FL

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: IVAN D RAMIREZ VP 02/08/2007