

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000061843

FILED  
Feb 04, 2008  
Secretary of State

Entity Name: ENACORE INTERNATIONAL, CORP.

## Current Principal Place of Business:

5837 SUNSET DRIVE  
SOUTH MIAMI, FL 33143 US

## New Principal Place of Business:

## Current Mailing Address:

5858 NW 113 PLACE  
DORAL, FL 33178 US

## New Mailing Address:

FEI Number: 20-4809446

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MAZA, JUAN M JR  
5854 NW 113 PL  
DORAL, FL 33178 US

## Name and Address of New Registered Agent:

MAZA, JUAN M JR  
5858 NW 113 PL  
DORAL, FL 33178 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:

02/04/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: SD ( ) Delete  
Name: MAZA, JUAN M JR  
Address: 5858 NW 113 PL  
City-St-Zip: DORAL, FL 33178

Title: PD ( ) Delete  
Name: MAZA, JUAN SR.  
Address: 5854 NW 113 PL  
City-St-Zip: DORAL, FL 33178

Title: VPD ( ) Delete  
Name: MARTA, MAZA  
Address: 5854 NW 113 PL  
City-St-Zip: DORAL, FL 33178

Title: TD ( ) Delete  
Name: VANI, MAHARAJ  
Address: 5858 NW 113 PL  
City-St-Zip: DORAL, FL 33178

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## 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: D ( ) Change (X) Addition  
Name: MAZA, ANDRES  
Address: 5854 NW 113 PL  
City-St-Zip: DORAL, FL 33178

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 MARIO MAZA JR.

SD

02/04/2008

Electronic Signature of Signing Officer or Director

Date