2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000061843

Entity Name: ENACORE INTERNATIONAL, CORP.

FILED Apr 15, 2009 Secretary of State

Current P	rincipal Place of Business:	New Principal Place of B	New Principal Place of Business:	
	SET DRIVE IIAMI, FL 33143 US			
Current M	lailing Address:	New Mailing Address:	New Mailing Address:	
5858 NW DORAL, F	113 PLACE 'L 33178 US			
FEI Number	: 20-4809446 FEI Number Applied Foi	r() FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of Current Registered Ag	ent: Name and Address of Ne	w Registered Agent:	
MAZA, JU. 5858 NW DORAL, F	113 PL			
	e named entity submits this statement f e of Florida.	or the purpose of changing its registered office	ce or registered agent, or both,	
SIGNATUI	RE:			
	Electronic Signature of Registe	red Agent	Date	
Election Car	mpaign Financing Trust Fund Contribution	()-		
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	SD () Delete MAZA, JUAN M JR 5858 NW 113 PL DORAL, FL 33178	Title: () C Name: Address: City-St-Zip:	hange () Addition	
Title: Name: Address: City-St-Zip:	PD () Delete MAZA, JUAN SR. 5854 NW 113 PL DORAL, FL 33178	Title: () C Name: Address: City-St-Zip:	hange()Addition	
Title: Name: Address: City-St-Zip:	VPD () Delete MARTA, MAZA 5854 NW 113 PL DORAL, FL 33178	Title: () C Name: Address: City-St-Zip:	hange()Addition	
Title: Name: Address: City-St-Zip:	TD () Delete VANI, MAHARAJ 5858 NW 113 PL DORAL, FL 33178	Title: () C Name: Address: City-St-Zip:	hange()Addition	
Title: Name: Address: City-St-Zip:	D (X) Delete MAZA, ANDRES 5854 NW 113 PL DORAL, FL 33178	Title: ()C Name: Address: City-St-Zip:	hange () Addition	

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 04/15/2009