

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000101501

FILED
Apr 30, 2005
Secretary of State

Entity Name: BECTRASYS CORPORATION

Current Principal Place of Business:

P.O. BOX 565388
MIAMI, FL 33256

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 565388
MIAMI, FL 33256

New Mailing Address:

FEI Number: 65-0797742

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RODRIGUEZ, SILVIA A
P.O. BOX 565388
MIAMI, FL 33256 US

Name and Address of New Registered Agent:

RODRIGUEZ, JOSE R
275 FONTAINEBLEAU BLVD.
SUITE 135
MIAMI, FL 33172 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: JOSE RAMON RODRIGUEZ

04/30/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: BECERRA-FERNANDEZ, IRMA
Address: P.O. BOX 565388
City-St-Zip: MIAMI, FL 33256

Title: VSD () Delete
Name: RODRIGUEZ, SILVIA A
Address: P.O. BOX 565388
City-St-Zip: MIAMI, FL 33256

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 Section 119.07(3)(i), 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: SILVIA A. RODRIGUEZ

VP

04/30/2005

Electronic Signature of Signing Officer or Director

Date