

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000080422

FILED
Jan 16, 2004
Secretary of State

Entity Name: DROCARAS INTERNATIONAL, INC.

Current Principal Place of Business:

1301 NW 89 CT
218
MIAMI, FL 33172

New Principal Place of Business:

Current Mailing Address:

1301 NW 89 CT
218
MIAMI, FL 33172

New Mailing Address:

FEI Number: 65-0952115

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAPPORT, STEPHEN R
201 ALHAMBRA CIRCLE,STE.711
CORAL GABLES, FL 33134

Name and Address of New Registered Agent:

SALAME, CARLOS E
1301 NW 89TH CT
SUITE 218
MIAMI, FL 33172

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: CARLOS SALAME

01/16/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SALAME, CARLOS
Address: 1301 NW 89 CT STE 218
City-St-Zip: MIAMI, FL 33172

Title: O () Delete
Name: VAZQUEZ, RICARDO
Address: 9619 FOUNTAINBLEAU BLVD/APT #108
City-St-Zip: MIAMI, FL 33172

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: CARLOS SALAME

PD

01/16/2004

Electronic Signature of Signing Officer or Director

Date