2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 15, 2004 08:00 AM
Secretary of State

DOCUMENT # P99000086171

1. Entity Name
RAICO INTERNATIONAL CORP.

Principal Place of Business	Mailing Address
7831 N.W. 72ND AVENUE MIAMI, FL 33166	780 NW 42 AVE # 416 MIAMI, FL 33126

01072004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0950814
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CORDOVA, ANGEL D
780 NW 42ND AVE
#416
MIAMI, FL 33126

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	NOGUES, JULIO L
STREET ADDRESS	COMESANA 4460 CP B1702 BOD
CITY-ST-ZIP	CIUDADELA BUENOS AIRES, AG XXXXX
TITLE	D
NAME	DE ACHAVAL DE NOGUES, TERESA
STREET ADDRESS	COMESANA 4460 CP B1702 BOD
CITY-ST-ZIP	CIUDADELA BUENOS AIRES, AG XXXXX
TITLE	DVS
NAME	NOGUES, ERNESTO
STREET ADDRESS	COMESANA 4460 CP B1702 BOD
CITY-ST-ZIP	CIUDADELA BUENOS AIRES, AG XXXXX
TITLE	VP
NAME	NOGUES, GASTON
STREET ADDRESS	COMESANA 4460 CP B1702 BOD
CITY-ST-ZIP	CIUDADELA BUENOS AIRES, AG XXXXX
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: X _____ JULIO L. NOGUES, PRES. 3/12/04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #