

**FILED**  
**Jan 16, 2007 8:00 am**  
**Secretary of State**

01-16-2007 90188 017 \*\*\*150.00

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**DOCUMENT # P99000109254**

1. Entity Name  
**DORCASE CORPORATION**



Principal Place of Business  
**333 NE 8 STREET  
HOMESTEAD, FL 33030 US**

Mailing Address  
**333 NE 8TH STREET  
HOMESTEAD, FL 33030 US**

**40002360**



01042007 No Chg-P CR2E034 (11/05)

4. FEI Number  
**65-1094839**

Applied For  
Not Applicable

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

**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent

**PASTRAN, RAUL E  
333 NE 8TH STREET  
HOMESTEAD, FL 33030**

**DO NOT WRITE  
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when restate)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PVST  
CAMINO, CARLOS E  
YELSIT SOCIEDAD ANOMIMA, ZABALA 1372  
MONTEVIDEO, URUGUAY,**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: