

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V14921

Entity Name: B.E.A. INTERNATIONAL CORPORATION

FILED  
Jan 05, 2006  
Secretary of State

## Current Principal Place of Business:

4111 LEJEUNE ROAD  
CORAL GABLES, FL 33146

## New Principal Place of Business:

4111 LE JEUNE ROAD  
CORAL GABLES, FL 33146

## Current Mailing Address:

4111 LEJEUNE ROAD  
CORAL GABLES, FL 33146

## New Mailing Address:

4111 LE JEUNE ROAD  
CORAL GABLES, FL 33146

FEI Number: 65-0337706

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

LICKSTIEN, FRED K  
100 SE 2ND STREET 17 FLOOR  
CORAL GABLES, FL 33146 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: RAMOS, BRUNO E  
Address: 200 CAPE FLORIDA DR  
City-St-Zip: KEY BISCAVNE, FL 33149

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MR. (X) Change ( ) Addition  
Name: RAMOS, BRUNO E  
Address: 200 CAPE FLORIDA DR  
City-St-Zip: KEY BISCAVNE, FL 33149

I hereby certify that the information supplied with this filing does not qualify for the 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: BRUNO-ELIAS RAMOS, AIA

MR.

01/05/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date