2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED

2007 MAR 23 AM 11:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A32754

1. Entity Name
VITTORIO HOLDINGS, LTD.

Principal Place of Business
2444 PROVENCE CIRCLE
WESTON, FL 33327

Send certificate to WESTON

Mailing Address
C/O GELBER & COMPANY
11450 INTERCHANGE CIRCLE NORTH
MIRAMAR, FL 33025

01192007 No Chg-LP CR2E003 (12/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0321076

Applied For
Not Applicable

5. Certificate of Status Desired X $8.75 Additional Fee Required

2444 Provence Cir. MAIL TO WESTON, FL. 33327

6. Name and Address of Current Registered Agent

GELBER, RONALD S
GELBER & COMPANY
11450 INTERCHANGE CIRCLE NORTH
MIRAMAR, FL 33025

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

FILE NOW!!! FEE IS $500.00
After May 1, 2007, Fee will be $900.00

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION

DOCUMENT #	
NAME	BECERRA, JOSEPH
STREET ADDRESS	2444 PROVENCE CIRCLE
CITY-ST-ZIP	WESTON, FL 33327
DOCUMENT #	
NAME	
STREET ADDRESS	
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NAME	
STREET ADDRESS	
CITY-ST-ZIP	

700095225937
03/29/07--01032--007 **500.00

700095225937
03/29/07--01032--008 **8.75

DO NOT WRITE IN THIS SPACE

STAPLE CHECK HERE

14. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: _____ 3/8/07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #