2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000003522

Entity Name: FERRARI EXPRESS INC.

LAWRENCE, NY 11559

City-St-Zip:

FILED Jun 29, 2005 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
215 MILL : LAWREN	STREET CE, NY 11559)		
Current Mailing Address:			New Mailing Address:	
215 MILL : LAWREN	STREET CE, NY 11559)		
FEI Number	r: 13-3576546	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of	Current Registered Agent:	Name and Address o	f New Registered Agent:
36 NE 18 ⁻ SUITE 104	CLAUDIO T STREET 49 . 33132 US			
	e named entity e of Florida.	submits this statement for the	ourpose of changing its registered	d office or registered agent, or both,
SIGNATU	RE:			
	Electro	nic Signature of Registered Ag	ent	Date
		93(2)(b), F.S., the corporation did nong Trust Fund Contribution ().	ot receive the prior notice.	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	P (FERRARI, DAI 215 MILL STR LAWRENCE, I	EET	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	V (MELILI, LAWF 215 MILL STR LAWRENCE, I	EET	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	FERRANTE, F	STREET, 10TH FL	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name:	VT (CELADA, CLA 215 MILL STR		Title: Name: Address:	() Change () Addition

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.

City-St-Zip:

SIGNATURE: CELADA CALUDIO VT 06/29/2005