


**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 14, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # F01000003505  
1. Entity Name  
SEPEL SERVIZI PER L'ELETTRONICA, SRL



Principal Place of Business 773 KIRKMAN RD STE 112 ORLANDO, FL 32811	Mailing Address 773 KIRKMAN RD STE 112 ORLANDO, FL 32811
---	---

**DO NOT WRITE IN THIS SPACE**



01072005 No Chg-P CR2E034 (10/03)

4. FEI Number 54-1637124	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
ROMICK, KATHY  
773 S. KIRKMAN RD STE 112  
ORLANDO, FL 32811

**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 Kathy Romick Secretary DATE 1-12-05  
(NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 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	P PETROSELLI, FRANCA VIA ERODOTO, 13 00124 ROME, ITALY,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PERLINI, GIANFRANCO VIA ERODOTO, 13 00124 ROME, ITALY,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CELIBERTI, VITO VIA ERODOTO, 13 00124 ROME, ITALY,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ROMICK, KATHY 773 KIRKMAN RD STE 112 ORLANDO, FL 32811
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000180644  
01/14/05-80014-001 163.75

**DO NOT WRITE IN THIS SPACE**

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: Kathy Romick DATE 1/12/05 DAYTIME PHONE # 407-523-1612  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR