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May 28 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N96000000335 (7)
1. Corporation Name
COMITES OF ITALY INC.



Principal Place of Business: 7275 S.W. 148TH STREET MIAMI FL 33158
Mailing Address: 7275 S.W. 148TH STREET MIAMI FL 33158

3. Date Incorporated or Qualified: 01/19/1996
4. FEI Number: 65-0833111 Applied For
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing: \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? Yes No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

2. Principal Place of Business
21 216 S.E. 6th St. Suite, Apt #, etc.
22
23 DANIA, FL City & State
24 33004 Zip
25 USA Country
26 216 S.E. 6th St. Suite, Apt #, etc.
27
28 DANIA, FL City & State
29 33004 Zip
30 USA Country

9. Name and Address of Current Registered Agent
SPINA, JOSEPH A
216 S.E. 6TH STREET
DANIA FL 33004

10. Name and Address of New Registered Agent
B1 Name: SPINA, Joseph P.
B2 Street Address (P.O. Box Number is Not Acceptable)
B3
B4 City: FL B5 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	DILEO, GAETANO	
STREET ADDRESS	7275 S.W. 148TH STREET	
CITY-ST-ZIP	MIAMI FL 33158	
TITLE	VPD	<input type="checkbox"/> DELETE
NAME	SPINA, JOSEPH P	
STREET ADDRESS	216 S.E. 6TH STREET	
CITY-ST-ZIP	DANIA FL 33004	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	COMPELLO, VALERIA	
STREET ADDRESS	10205 S.W. 115TH COURT	
CITY-ST-ZIP	MIAMI FL 33176	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	SINCERI, CARLO	
STREET ADDRESS	8530 N.E. 10TH AVENUE	
CITY-ST-ZIP	MIAMI FL 33138	
TITLE	D	<input type="checkbox"/> DELETE
NAME	CANZIAN, ALBERTO	
STREET ADDRESS	400 ALMALLI AVENUE	
CITY-ST-ZIP	CORAL GABLES FL 33146	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	DIRECTOR	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	D. LEO. GAETANO	
1.3 STREET ADDRESS	7275 S.W. 148TH ST.	
1.4 CITY-ST-ZIP	MIAMI, FL 33158	
2.1 TITLE	PRESIDENT-DIRECTOR	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	SPINA, JOSEPH P	
2.3 STREET ADDRESS	216 S.E. 6th St.	
2.4 CITY-ST-ZIP	DANIA, FL 33004	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	VICE-PRESIDENT-DIRECTOR	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	SINCERI, CARLO P	
4.3 STREET ADDRESS	8530 N.E. 10TH AVE	
4.4 CITY-ST-ZIP	MIAMI, FL 33138	
5.1 TITLE	TREASURER-DIRECTOR	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	CANZIAN, ALBERTO	
5.3 STREET ADDRESS	400 ALMALLI AVE	
5.4 CITY-ST-ZIP	CORAL GABLES, FL 33146	
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. 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 annual report or supplemental annual 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Joseph P. Spina, Pres. JOSEPH P. SPINA 5/27/98 (954) 920-2490

CR2E037 (10/97)