

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 05, 2001 8:00 am**  
**Secretary of State**

02-05-2001 90002 016 \*\*\*\*61.25

**DOCUMENT # N98000005618**

1. Entity Name

**AMERICAN ITALIAN ASSOCIATION OF HOLLYWOOD ESTATE**

Principal Place of Business

Mailing Address

**3300 NO. STATE RD.7.STE.408  
 HOLLYWOOD FL 33021**

**3300 NO. STATE RD.7.STE.408  
 HOLLYWOOD FL 33021**

J I T O O U



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

**NOT APPLICABLE**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

**\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**GAMBA, PAT  
 3300 NO. STATE RD.7.STE.408  
 HOLLYWOOD FL 33021**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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.

SIGNATURE \_\_\_\_\_

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:  
 FEE IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution.

**\$5.00** May Be Added to Fees

**Make Check Payable to  
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	NAME	TITLE	NAME
DP	GAMBA, PAT		
3300 N SR.7 E 408			
HOLLYWOOD FL 33021			
DT	GIANNETTINO, IDA		
3300 N SR 7 B187			
HOLLYWOOD FL 33021			
D	DIGUIDO, ROSELLA		
3300 N SR 7-A19			
HOLLYWOOD FL 33021			
SECRETARY	MILDRED STANCO		
4927 SW 32 WAY			
FT LAUDERDALE FL 33312			
TREASURER	JOSEPHINE BALSAMO		
3300 N SR 7 - B 341			
HOLLYWOOD FL 33021			
FINANCIAL SECT.	GLADYS MARINO		
3300 N SR 7 - B 193			
HOLLYWOOD FL 33021			

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 617, 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: *IDA GIANNETTINO*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/26/2001

Date

954-967-8512

Daytime Phone #

CR2E037 (10/00)