2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000130869

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

GENOVA, ITALY,

900 NW 10 AVE

NEGRO, ALESSANDRO

() Delete

FORT LAUDERDALE, FL 33311

FILED Jan 09, 2008 Secretary of State

Entity Name: BIANCHI & CECCHI SERVICE, INC. **Current Principal Place of Business: New Principal Place of Business:** 900 NW 10 AVENUE FORT LAUDERDALE, FL 33311 **Current Mailing Address: New Mailing Address:** 900 NW 10 AVENUE FORT LAUDERDALE, FL 33311 FEI Number: 20-1655706 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KOUTOULAS & RELIS, LLC 1776 PINE ISLAND ROAD SUITE 316 PLANTATION, FL 33322 US 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition BIANCHI, ALFREDO BIANCHI, ALFREDO Name: Name: VIA AURELIA DI LEVANTE 27, COGOLETO 900 NW 10 AV Address: Address: City-St-Zip: GENOVA, ITALY, OC City-St-Zip: FT LAUDERDALE, FL 33311 SD Title: Title: () Delete (X) Change () Addition Name: NEGRO, MATTCO Name: NEGRO, MATTEO 13195 BISCAYNE BAY TERRACE 13195 BISCAYNE BAY TERRACE Address: Address: MIAMI, FL 33181 MIAMI, FL 33181 City-St-Zip: City-St-Zip: Title: Title: () Delete (X) Change () Addition VALERIO, GLAN L VALERIO, GIAN L Name: Name: VIA ACQUARONE 24/12 900 NW 10 AV Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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:

Title:

Name:

Address:

City-St-Zip:

FT LAUDERDALE, FL 33311

() Change () Addition

SIGNATURE: MATTEO NEGRO D 01/09/2008