

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000032464

FILED
Mar 22, 2006
Secretary of State

Entity Name: SAGGIO DREAM DEVELOPERS, INC.

Current Principal Place of Business:

2581 4TH AVE. S.E.
NAPLES, FL 34117

New Principal Place of Business:

Current Mailing Address:

2581 4TH AVE. S.E.
NAPLES, FL 34117

New Mailing Address:

FEI Number: 20-2478697

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LUCARELLI, DOMENIC A
2500 AIRPORT RD. S.
SUITE 306
NAPLES, FL 34112 US

Name and Address of New Registered Agent:

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:

Title: D () Delete
Name: MATTEI, ANTHONY
Address: 1075 BLUE BIMINI CIRCLE
City-St-Zip: ESTERO, FL 33928

Title: D () Delete
Name: LOPEZ, OSMANY
Address: 1075 BLUE BIMINI CIRCLE
City-St-Zip: ESTERO, FL 33928

Title: D () Delete
Name: ACOSTA, DEYSI
Address: 1075 BLUE BIMINI CIRCLE
City-St-Zip: ESTERO, FL 33928

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MATTEI, ANTHONY
Address: 10725 BLUE BIMINI CIRCLE
City-St-Zip: ESTERO, FL 33928

Title: D (X) Change () Addition
Name: LOPEZ, OSMANY
Address: 2945 24TH AVE SE
City-St-Zip: NAPLES, FL 34117

Title: D (X) Change () Addition
Name: ACOSTA, DEYSI
Address: 2581 4TH AVE SE
City-St-Zip: NAPLES, FL 34117

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: OL _____

Electronic Signature of Signing Officer or Director

D _____

03/22/2006

_____ Date