

**2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Oct 17, 2007  
Secretary of State**

DOCUMENT# P05000153870

Entity Name: DALL'ITALIA COMBIPELLE, CORP.

**Current Principal Place of Business:**

2396 W 73 PL  
HIALEAH, FL 33016

**New Principal Place of Business:**

**Current Mailing Address:**

2396 W 73 PL  
HIALEAH, FL 33016

**New Mailing Address:**

FEI Number: 20-3823435      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CASTANEDA, ALEJANDRO  
2396 W 73 PL  
HIALEAH, FL 33016      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

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: CASTANEDA, ALEJANDRO  
Address: 2396 W 73 PL  
City-St-Zip: HIALEAH, FL 33016

Title: VPD ( ) Delete  
Name: HUARTE, MICHEL  
Address: 7245 S PRESTWICK PL  
City-St-Zip: MIAMI, FL 33014

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VPD (X) Change ( ) Addition  
Name: FELDMAN, ISAAC  
Address: 18090 COLLINS AVE SUITE T-10  
City-St-Zip: MIAMI, FL 33160

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.

SIGNATURE: CASTANEDA ALEJANDRO

PD

10/17/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date