


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2005 8:00 am
Secretary of State

03-23-2005 90033 039 ***150.00

DOCUMENT # P96000091485 1. Entity Name FLEGREA INVESTMENT CORPORATION	
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Principal Place of Business 1800 SUNSET HARBOUR DR APT 1808 MIAMI BEACH, FL. 33139-1457 US	Mailing Address 1800 SUNSET HARBOUR DR APT 1808 MIAMI BEACH, FL 33139-1457 US
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DO NOT WRITE IN THIS SPACE



03212005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0708592	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

AMBROSINO, GENARO
1800 SUNSET HARBOUR DR
APT 1808
MIAMI, FL 33139-1457

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Gen Ambrosino GENARO AMBROSINO 03/21/05
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D AMROSINO, MICHELE 1800 SUNSET HARBOUR DR APT 1808 MIAMI BEACH, FL 331391457
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D AMBROSINO, GENARO 1800 SUNSET HARBOUR DR APT 1808 MIAMI BEACH, FL 331391457
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D AMBROSINO, ROSANNA DE 1800 SUNSET HARBOUR DR APT 1808 MIAMI BEACH, FL 331391457
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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 607, 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: Gen Ambrosino GENARO AMBROSINO 03/21/05 305-891577
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE Daytime Phone #