

FILED
Mar 06, 2003 8:00 am
Secretary of State

03-06-2003 90140 029 ***150.00

**2003 FOR PROFIT CORPORATION
 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P98000020246

1. Entity Name
GIANNA TODISCO ADVERTISING AND MARKETING RESEARCH, INC.



80048020

Principal Place of Business
**781 SUGARLOAF BOULEVARD
 SUGARLOAF KEY, FL 33042**

Mailing Address
**781 SUGARLOAF BOULEVARD
 SUGARLOAF KEY, FL 33042**

2. Principal Place of Business
 Suite, Apt. #, etc.
 City & State
 Zip

3. Mailing Address
3142 NORTHSIDE DR
 Suite, Apt. #, etc.
201
 City & State
KEY WEST FL
 Zip
33040



CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent
**FINE, ROBERTA S
 818 WHITE STREET
 KEY WEST, FL 33042**

4. FEI Number
65-0824724

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

7. Name and Address of New Registered Agent
 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when re-registering) DATE _____

FILE NOW!!!! FEE IS \$160.00
 After May 1, 2003 Fee will be \$550.00
 Make Check Payable to Florida Department of State

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	<input type="checkbox"/> Delete
	TODISCO, GIOVANNA	781 SUGARLOAF BOULEVARD	SUGARLOAF KEY, FL 33042	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
		3142 NORTHSIDE DR Ste 201	KEY WEST FL 33040	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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: *Gianna Todisco* **2-26-03 305-292-9322**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)