2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000074487

Entity Name: CHRISIM CORPORATION

US

FILED Apr 17, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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417 ESPANOLA WAY MIAMI BEACH, FL 33139

Current Mailing Address: New Mailing Address:

417 ESPANOLA WAY

MIAMI BEACH, FL 33139 US

FEI Number: 65-0947558 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

VELLUTI, SIMONE MORETTI, FABIO 417 ESPANOLA WAY 417 ESPÁNOLA WAY

MIAMI BEACH, FL 33139 US US MIAMI BEACH, FL 33139

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: FABIO MORETTI 04/17/2009

> 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 VELLUTI-ZATI, SIMONE VELLUTI-ZATI, SIMONE Name: Name: C/O 417 ESPANOLA WAY C/O 417 ESPANOLA WAY Address: Address: City-St-Zip: MIAMI BEACH, FL 33139 US City-St-Zip: MIAMI BEACH, FL 33139 US

Title: DP Title: () Delete (X) Change () Addition MORETTI, FABIO Name: Name: MORETTI, FABIO

C/O 417 ESPANOLA WAY C/O 417 ESPANOLA WAY Address: Address: MIAMI BEACH, FL 33139 US MIAMI BEACH, FL 33139 US City-St-Zip: City-St-Zip:

() Delete Title: Title: () Change () Addition

SANTOPAOLO, ALESSANDRO Name: Name: C/O 417 ESPANOLA WAY Address Address: City-St-Zip: MIAMI BEACH, FL 33139 US City-St-Zip:

Title: () Delete Title: () Change (X) Addition

BIANCO, MASSIMO Name: Name: Address: Address: C/O 417 ESPANOLA City-St-Zip: City-St-Zip: MIAMI BEACH, FL 33139 US

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: FABIO MORETTI D 04/17/2009