2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000051371

Entity Name: LUCATI ENTERPRISE INC.

FILED Apr 29, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4612 S OCEAN BLVD 4612 S. OCEAN BLVD

HIGHLAND BCH, FL 33487 US HIGHLAND BEACH, FL 33487 US

Current Mailing Address: New Mailing Address:

4612 S OCEAN BLVD 4612 S. OCEAN BLVD

HIGHLAND BCH, FL 33487 US HIGHLAND BEACH, FL 33487 US

FEI Number: 98-0169269 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MILANI, CAMILLO D

4612 S OCEAN BLVD

MILANI, CAMILLO D

4612 S. OCEAN BLVD

HIGHLAND BCH, FL 33487 US HIGHLAND BEACH, FL 33487 US

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: CAM MILANI 04/29/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

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

Title: DPS () Delete Title: DPS (X) Change () Addition Name: MILANI, LUCIA Name: MILANI, LUCIA

 Name:
 MILANI, LUCIA
 Name:
 MILANI, LUCIA

 Address:
 4612 S OCEAN BLVD
 Address:
 4612 S. OCEAN BLVD

 City-St-Zip:
 HIGHLAND, FL 33487
 City-St-Zip:
 HIGHLAND BEACH, FL 33487

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

Name:MILANI, CAMILLO DName:MILANI, CAMILLO DAddress:4612 S OCEAN BLVDAddress:4612 S. OCEAN BLVDCity-St-Zip:HIGHLAND BCH, FL 33487City-St-Zip:HIGHLAND BEACH, FL 33487

I hereby certify that the information supplied with this filing does not qualify for the 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 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: CAM MILANI ST 04/29/2005