

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42510

Entity Name: ITALY-AMERICA CHAMBER OF COMMERCE SOUTHEAST, INC.**FILED**
Feb 24, 2015
Secretary of State
CC8187016012**Current Principal Place of Business:**2 S. BISCAYNE BLVD.
STE. 1880
MIAMI, FL 33131**Current Mailing Address:**2 S. BISCAYNE BLVD.
STE. 1880
MIAMI, FL 33131 US**FEI Number:** 65-0285429**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**RAIA, JOSEPH
2 S. BISCAYNE BLVD
SUITE 34
MIAMI, FL 33131 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	PD
Name	FONTANI, GIANLUCA
Address	2 S. BISCAYNE BLVD., STE. 1880
City-State-Zip:	MIAMI FL 33131

Title	DVP
Name	CARDANA, TOMMASO
Address	2 S. BISCAYNE BLVD., STE. 1880
City-State-Zip:	MIAMI FL 33131

Title	DV
Name	PELOSI, GIANCARLO
Address	2 S. BISCAYNE BLVD., STE. 1880
City-State-Zip:	MIAMI FL 33131

Title	TD
Name	NANNI, DANILO
Address	2 S. BISCAYNE BLVD., STE. 1880
City-State-Zip:	MIAMI FL 33131

Title	SD
Name	BONAVITA, UMBERTO L
Address	2 S. BISCAYNE BLVD., STE. 1880
City-State-Zip:	MIAMI FL 33131

Title	ED
Name	BOCCANERA, NEVIO
Address	2 S. BISCAYNE BLVD. STE. 1880
City-State-Zip:	MIAMI FL 33131

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: NEVIO BOCCANERA**EXECUTIVE DIRECTOR****02/24/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date