

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000035078

**Entity Name:** GRAN SASSO USA, INC.

**Current Principal Place of Business:**

888 BISCAYNE BLVD.  
SUITE 5605  
MIAMI, FL 33132

**FILED**  
**Apr 23, 2014**  
**Secretary of State**  
**CC6475685836**

**Current Mailing Address:**

888 BISCAYNE BLVD.  
SUITE 5605  
MIAMI, FL 33132 US

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: No**

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

TRINCHERO, PIERO  
3071 NW 107 AVE.  
MIAMI, FL 33172 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           | P                              | Title           | VP                             |
| Name            | CIAMPOLI, TOMMASO              | Name            | SCIOTTI, VALENTINO             |
| Address         | 888 BISCAYNE BLVD., SUITE 5605 | Address         | 888 BISCAYNE BLVD., SUITE 5605 |
| City-State-Zip: | MIAMI FL 33132                 | City-State-Zip: | MIAMI FL 33132                 |

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

**SIGNATURE: VALENTINO SCIOTTI**

**VP**

**04/23/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date