

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P14000027747

**FILED**  
**Jan 13, 2015**  
**Secretary of State**  
**CC6189805081**

**Entity Name:** GIOVANNI SANDRI CORPORATION

**Current Principal Place of Business:**

747 15TH ST  
APT 3  
MIAMI BEACH, FL 33139

**Current Mailing Address:**

747 15TH ST  
APT 3  
MIAMI BEACH, FL 33139

**FEI Number: 38-3927610**

**Certificate of Status Desired: Yes**

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

HEYER, DEBRA A  
8569 PINES BLVD STE 214  
PEMBROKE PINES, FL 33024 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  
Name SANDRI, GIOVANNI  
Address 747 15TH ST APT 3  
City-State-Zip: MIAMI BEACH FL 33139

Title VP  
Name TSAPI, STAVROULA  
Address 747 15TH ST APT 3  
City-State-Zip: MIAMI BEACH FL 33139

Title VP  
Name SANDRI, SANDRO  
Address 1840 JAMES AVE APT 10  
City-State-Zip: MIAMI BEACH FL 33139

Title S  
Name ARDUINO, FERNANDA  
Address 1840 JAMES AVE APT 10  
City-State-Zip: MIAMI BEACH FL 33139

Title MGR  
Name MONTERO FLORES, OMAR IVAN  
Address 300 21ST APT 309  
City-State-Zip: MIAMI BEACH FL 33139

*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: GIOVANNI SANDRI**

**GIOVANNI SANDRI**

**01/13/2015**

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

\_\_\_\_\_  
Date