

2000 UNIFORM BUSINESS REPORT (UBR)

092000

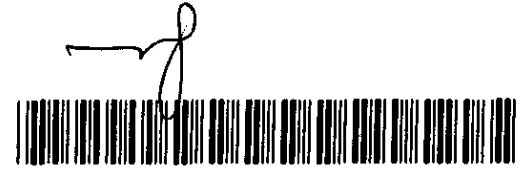
DOCUMENT # A99000000545

1. Entity Name
GIANCO HOLDINGS, LTD.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 SEP 26 AM 11:02

Principal Place of Business UNIT NO. 4. COSTA CORPORATE CENTRE 3325 N.W. 97TH AVENUE MIAMI FL 33178	Mailing Address UNIT NO. 4. COSTA CORPORATE CENTRE 3325 N.W. 97TH AVENUE MIAMI FL 33178
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address		4. FEI Number 65-0907316		Applied For <input type="checkbox"/> Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			
City & State		City & State					
Zip	Country	Zip	Country				

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HCRM CORP. 2200 CORPORATE BLVD., N.W., SUITE 401 BOCA RATON FL 33431		Name D.J. GIANCOLA EXPORTS, INC.	
		Street Address (P.O. Box Number is Not Acceptable) 3325 NW 97TH AVENUE	
		City MIAMI	Zip Code FL 33178

8. 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 **CHARLES C GIANCOLA** DATE **8/1/00**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. Capital Contributions as Shown on record. \$980.00	10. Amount of Capital Contributions in FLORIDA to date.	11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
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A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	P99000029740 GIANCO HOLDINGS, INC. 3325 N.W. 97TH AVE, UNIT 4 MIAMI FL 33178	STREET ADDRESS	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		CITY-ST-ZIP	
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DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		CITY-ST-ZIP	600003404476-2 09/26/00-01062-001 ***1091.25 ***541.25
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DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: **CHARLES C GIANCOLA** DATE **8/1/00**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

CR2E003 (5/00)