

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000003924

FILED
Jan 09, 2007
Secretary of State

Entity Name: ILLY CAFFE NORTH AMERICA, INC.

Current Principal Place of Business:

800 WESTCHESTER AVE.
SUITE S440
RYE BROOK, NY 10573

New Principal Place of Business:

Current Mailing Address:

825 THIRD AVENUE
FH&C, 12TH FLOOR
NEW YORK, NY 10022

New Mailing Address:

FEI Number: 86-0400086

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NATIONAL CORPORATE RESEARCH, LTD., INC.
515 E. PARK AVE.
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: ILLY, ANDREA
Address: VIA FLAVIA 110
City-St-Zip: 34147 TRIESTE, NA IT

Title: PD () Delete
Name: FEA, GREGORY C
Address: 800 WESTCHESTER AVE., SUITE S440
City-St-Zip: RYE BROOK, NY 10573

Title: D () Delete
Name: ILLY, ANNA
Address: VIA FLAVIA 110
City-St-Zip: 34147 TRIESTE, NA IT

Title: D () Delete
Name: DEGRASSI, LICERIO
Address: VIA FLAVIA 110
City-St-Zip: 34147 TRIESTE, NA IT

Title: D () Delete
Name: BERTOZZI, CARLO A
Address: SHORE POINTE ONE SELLECK STREET
City-St-Zip: NORWALK, CT 06855

Title: S () Delete
Name: MARSCHNER, EDWARD C
Address: FH&C, 825 THIRD AVE, 12TH FLOOR
City-St-Zip: NEW YORK, NY 10022

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change () Addition
Name: BADIOLI, CARLO
Address: 800 WESTCHESTER AVE., SUITE S440
City-St-Zip: RYE BROOK, NY 10573

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: EDWARD C. MARSCHNER

S

01/09/2007

Electronic Signature of Signing Officer or Director

Date