## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F02000003440

FILED Mar 29, 2006 Secretary of State

Entity Name: GIOIA SAILS, INC.					
Current Principal Place of Business:			New Principal Place of Business:		
	GERS UNIVEI DD, NJ 08701	RSITY BOULEVARD			
Current Mailing Address:			New Mailing Address:		
	GERS UNIVEI DD, NJ 08701	RSITY BOULEVARD			
FEI Number:	22-2603193	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of (	Current Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
GIOIA, DONALD T 1304 SOUTH US HIGHWAY 1 BUNNELL, FL 32110 US			GIOIA, DONALD T 2125 N. US 1 BUNNELL, FL 32110	US	
	named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATURE: DONALD T. GIOIA				03/29/2006	
	Electro	nic Signature of Registered Age	ent	Date	
Election Car	npaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PC ( GIOIA, DONAL 534 HARBOR I BRICK, NJ 08	RD	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	STACY, ROBE 214 OSBORN		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	SD ( GIOIA, DONAL 406 ROBINS R SHARK RIVER	OAD	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name:	TD ( STACY, MICHA	) Delete AEL	Title: Name:	( ) Change ( ) Addition	

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.

Address:

City-St-Zip:

411 MATT ROBINSON LANE

POINT PLEASANT, NJ 08742

Address:

City-St-Zip: