

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000001267

FILED
Jan 20, 2009
Secretary of State

Entity Name: SAVINO DEL BENE U.S.A., INC.

Current Principal Place of Business:

149-10 183RD ST.
JAMAICA, NY 11413

New Principal Place of Business:

Current Mailing Address:

149-10 183RD ST.
JAMAICA, NY 11413

New Mailing Address:

FEI Number: 11-3402863

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUERTA, ZAIRA
8815 NW 33 STREET SUITE 110M
MIAMI, FL 33172 US

Name and Address of New Registered Agent:

HUERTA, ZAIRA
8815 NW 33 STREET SUITE 110
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:

01/20/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BRANDANI, SILVANO
Address: 57100 LIVORNO
City-St-Zip: VIA DELLE CATERRATE ITALY, 116188

Title: EVP () Delete
Name: IRWIN, MARK
Address: 149-10 183RD ST.
City-St-Zip: JAMAICA, NY 11413

Title: VPF () Delete
Name: SHEINBLUM, FRED
Address: 149-10 183RD ST.
City-St-Zip: JAMAICA, NY 11413

Title: S () Delete
Name: OCCASO, FILIPPO
Address: 149-10 183RD ST.
City-St-Zip: JAMAICA, NY 11413

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

I hereby certify that the information supplied with this filing does not qualify 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: FRED SHEINBLUM

VPF

01/20/2009

Electronic Signature of Signing Officer or Director

Date