

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000001547

FILED
Aug 24, 2011
Secretary of State

Entity Name: ITAL-UIL-USA, INC.

Current Principal Place of Business:

660 LINTON BLVD
SUITE 209
DELRAY BEACH, FL 33444

Current Mailing Address:

660 LINTON BLVD
SUITE 209
DELRAY BEACH, FL 33444

New Principal Place of Business:

660 LINTON BLVD
SUITE 213
DELRAY BEACH, FL 33444

New Mailing Address:

660 LINTON BLVD
SUITE 213
DELRAY BEACH, FL 33444

FEI Number: 11-2860716

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CANNONE, MARGARET
660 LINTON BLVD., SUITE 209
DELRAY BEACH, FL 33444 US

Name and Address of New Registered Agent:

CANNONE, MARGARET
660 LINTON BLVD.
SUITE 213
DELRAY BEACH, FL 33444 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: MARGARET CANNONE

08/24/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: JOSEPH, DELLI CARPINI
Address: 7301 18 AVENUE
City-St-Zip: BROOKLYN, NY 11204

Title: V
Name: PORTO, DINO
Address: 7301 18 AVENUE
City-St-Zip: BROOKLYN, NY 11204

Title: T
Name: LACARBONARA, LOUIS
Address: 7301 18 AVENUE
City-St-Zip: BROOKLYN, NY 11204

Title: S
Name: FRONTERRE, SALVATORE
Address: 7301 18 AVENUE
City-St-Zip: BROOKLYN, NY 11204

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SALVATORE FRONTERRE

S

08/24/2011

Electronic Signature of Signing Officer or Director

Date