## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F05000004615

Entity Name: POGGI BROTHERS USA, INC.

FILED Jan 22, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** C/O FOX HORAN & CAMERINI LLP 1699 NORTH POWERLINE ROAD 825 THIRD AVENUE, 11TH FLOOR POMPANO BEACH, FL 33069 NEW YORK, NY 10022 **New Mailing Address: Current Mailing Address:** C/O FOX HORAN & CAMERINI LLP 1699 NORTH POWERLINE ROAD 825 THIRD AVENUE, 11TH FLOOR POMPANO BEACH, FL 33069 US NEW YORK, NY 10022 FEI Number: 03-0564262 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: UNITED CORPORATE SERVICES, INC 9200 SOUTH DADELAND BLVD., SUITE 508 MIAMI, FL 33156 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: **PSTD** (X) Change ( ) Addition COLLEDANI, DENIS GULISANO, MARCELLO Name: Name: 825 THIRD AVE., 11TH FLOOR 1699 NORTH POWERLINE ROAD Address: Address: City-St-Zip: NEW YORK, NY 10022 US City-St-Zip: POMPANO BEACH, FL 33069 US (X) Delete Title: Title: () Change () Addition Name: POGGI, MAURO Name: 825 THIRD AVE., 11TH FLOOR Address: Address: NEW YORK, NY 10022 US City-St-Zip: City-St-Zip: Title: Title: (X) Delete () Change () Addition COLLEDANI, GIANNA Name: Name: 825 THIRD AVE., 11TH FLOOR Address: Address: NEW YORK, NY 10022 US City-St-Zip: City-St-Zip: Title: (X) Delete Title: () Change () Addition CAMERINI, DAVID C Name: Name: Address: 825 THIRD AVE., 12TH FLOOR Address: City-St-Zip: NEW YORK, NY 10022 US 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: MARCELLO GULISANO PSTD 01/22/2009