2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000005013

Address:

City-St-Zip:

VALLEY STREAM, NY 11580

FILED Jan 16, 2008 Secretary of State

Entity Name: SALVIATI & SANTORI IFF, INC. **Current Principal Place of Business: New Principal Place of Business:** 10 E MERRICK ROAD ROOM 210 11005 NW 33RD STREET VALLEY STREAM, NY 11580 MIAMI, FL 33172 **Current Mailing Address: New Mailing Address:** 10 E MERRICK ROAD ROOM 210 VALLEY STREAM, NY 11580 FEI Number: 45-0574699 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CORPORATION SERVICE COMPANY SANTORI, FRANCESCO 1201 HAYS STREET 11005 NW 33RD STREET TALLAHASSEE, FL 323012525 US MIAMI, FL 33172 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: INDRANI NARAIN 01/16/2008 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition SANTORI, FRANESCO Name: Name: 10 E MERRICK ROAD ROOM 210 Address: Address: City-St-Zip: VALLEY STREAM, NY 11580 City-St-Zip: Title: DVP Title: () Delete () Change () Addition Name: CAZAN, RICHARD Name: 10 E MERRICK ROAD ROOM 210 Address: Address: VALLEY STREAM, NY 11580 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition KIRSHHEIM, MICHAELA Name: Name: 10 E MERRICK ROAD ROOM 210 Address: Address: VALLEY STREAM, NY 11580 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition NARAIN, INDRANI Name: Name: 10 E MERRICK ROAD ROOM 210

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.

Address:

City-St-Zip:

SIGNATURE: INDRANI NARAIN 01/16/2008 Τ