2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2004
Secretary of State

DOCUMENT# F94000003743

Entity Name: IMOLA MARKETING AND SERVICES, INC.

Current Principal Place of Business:

8975 NW 25 STREET
MIAMI, FL 33172

New Principal Place of Business:

Current Mailing Address:

8975 NW 25 STREET
MIAMI, FL 33172

New Mailing Address:

FEI Number: 65-0230057 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

AMES, STUART D
2200 MUSEUM TOWER
150 W. FLAGLER STREET
MIAMI, FL 33130 US

Name and Address of New Registered Agent:

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:

Title: D ( ) Delete
Name: MONDINI, GIANPIETRO
Address: 8975 NW 25 ST
City-St-Zip: MIAMI, FL 33172

Title: D (X) Delete
Name: GARCIOFFI, STEFANO
Address: 8975 NW 25ST
City-St-Zip: MIAMI, FL 33172

Title: D (X) Delete
Name: PAGLIALONGA, MAURIZIO
Address: 8975 NW 25ST
City-St-Zip: MIAMI, FL 33172

Title: VPT (X) Delete
Name: MIRELLA,
Address: 8975 NW 25 ST
City-St-Zip: MIAMI, FL 33172

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: SINDONI, SALVATORE
Address: 8975 NW 25 ST
City-St-Zip: MIAMI, FL 33172

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 for the exemption stated in Section 119.07(3)(i), 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: SALVATORE SINDONI D 04/29/2004

Electronic Signature of Signing Officer or Director — Date