2002 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address

SIGNATURE:

Feb 07, 2002 8:00 am Secretary of State DOCUMENT # F97000001277 1. Entity Name 02-07-2002 90174 030 ***150.00 VANETTA (U.S.A.) INC. Mailing Address Principal Place of Business 5696 PINKNEY AVENUE 5696 PINKNEY AVENUE SARASOTA FL 34233 SARASOTA FL 34233 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 13-3607064 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired П 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM, INC. Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301 Zip Code City 8. 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. ☐ Addition [] Change ☐ Delete TITLE TITLE NAME NAME GORI-MONTANELLI, RICCARDO PAVIA & HARCOURT, 600 MADISON AVE STREET ADDRESS STREET ADDRESS NEW YORK NY 10022 CITY-ST-7IP CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE THIE NAME NAME MINGHETTI. PAOLO STREET ADDRESS STREET ADDRESS IVIA ALZAIZA TRENTO, 10/20094 CITY-ST-ZIP CITY-ST-ZIP CORSICO, MILANO, ITALY ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME MITCHELL, JOHN NAME PAVIA & HANCOURT 600 MADISON AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NEW YORK NY 10022 ☐ Addition ☐ Change TITLE VΡ ☐ Delete TITLE NAME NAME PAGE, DAVID STREET ADDRESS STREET ADDRESS 5696 PINKNEY AVE CITY-ST-ZIP SARASOTA FL 34233 CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filing does not qualify 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 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 er power of percent is execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

FILED