2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F99000000746

1. Entity Name
IDELSON-GNOCCHI LTD., INC.

Principal Place of Business	Mailing Address
12255 NW HWY. 225A REDDICK, FL 32686	12255 NW HWY. 225A REDDICK, FL 32686

DO NOT WRITE IN THIS SPACE
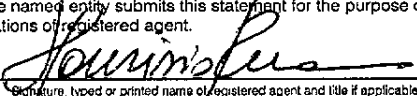
01132004   No Chg-P   CR2E034 (10/03)

4. FEI Number		Applied For
59-3558361		Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

RUSSO, MAURIZIO C
12255 NW HWY 225A
REDDICK, FL 32686

DO NOT WRITE IN THIS SPACE

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _[signature]_   MAURIZIO RUSSO   JAN 28/04
Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE
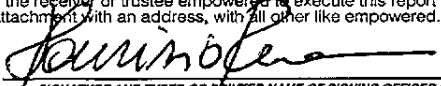
FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	CP
NAME	GNOCCHI, GUIDO
STREET ADDRESS	VIA A. DEGASPERI, 55
CITY-ST-ZIP	80133 NAPOLI, ITALY,

TITLE	CVST
NAME	RUSSO, MAURIZIO C
STREET ADDRESS	12255 NW HWY. 225A
CITY-ST-ZIP	REDDICK, FL 32686

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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TITLE	
NAME	
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CITY-ST-ZIP	

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01/30/04--80041-013 150.00

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12. 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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _[signature]_   JAN 28/04   352-591-1136
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #