2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H11423

Entity Name: BASILICATO CORPORATION

FILED Jul 16, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1799 MCCAULEY RD. CLEARWATER, FL 346251542

Current Mailing Address: New Mailing Address:

1799 MCCAULEY RD. CLEARWATER, FL 346251542

FEI Number: 59-2442627 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:

BROWDER, DAVID JR. ESQUIRE
305 SOUTH DUNCAN AVENUE
SUITE 200
CLEARWATER, FL 33515 US

BROWDER, DAVID ESQ
305 SOUTH DUNCAN AVENUE
SUITE 200
CLEARWATER, FL 33515 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: DAVID BROWDER 07/16/2008

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition SEZIONALE, ELISABETH, SEZIONALE, ELISABETH Name: Name: 220 DRIFTWOOD LANE 220 DRIFTWOOD LANE Address: Address: City-St-Zip: BELLEAIR BLUFFS, FL City-St-Zip: BELLEAIR BLUFFS, FL 33770 US

Title: STD Title: (X) Change () Addition () Delete PODGUR, PATRICIA. Name: Name: PODGUR, PATRICIA 1799 MCCAULEY ROAD Address: 1799 MCCAULEY ROAD Address: CLEARWATER FL, CLEARWATER, FL 33765 US City-St-Zip: 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: ELISABETH SEZIONALE PD 07/16/2008