

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000004019

Entity Name: TREASURES OF ITALY, LLC

FILED
Mar 27, 2007
Secretary of State

Current Principal Place of Business:

1238 ACAPPELLA LANE
APOLLO BEACH,, FL 33572 US

New Principal Place of Business:

8215 NATURES WAY, SUITE 113
BRADENTON,, FL 34202 US

Current Mailing Address:

1238 ACAPPELLA LANE
APOLLO BEACH,, FL 33572 US

New Mailing Address:

FEI Number: 20-4273148 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLALOCK, WALTERS, HELD & JOHNSON, P.A.
802 11TH STREET WEST
BRADENTON, FL 342057734 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: VENTO, ANTHONY J
Address: 1238 ACAPPELLA LANE
City-St-Zip: APOLLO BEACH, FL 33572 US

Title: MGRM () Delete
Name: MATIJAK, PAUL M
Address: 1238 ACAPPELLA LANE
City-St-Zip: APOLLO BEACH, FL 33572 US

Title: MGRM () Delete
Name: ANZALOTTI, PETER
Address: 1238 ACAPPELLA LANE
City-St-Zip: APOLLO BEACH, FL 33572 US

ADDITIONS/CHANGES:

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 Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ANTHONY J. VENTO

MR.

03/27/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date