

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000086299

Entity Name: GELA USA LLC

**FILED**  
**Apr 09, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

5392 NE 13TH WAY  
POMPANO BEACH, FL 33064

**New Principal Place of Business:**

**Current Mailing Address:**

55 NE 5TH AVENUE  
501  
BOCA RATON, FL 33432

**New Mailing Address:**

FEI Number: 27-0877905

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MONIQUE TRONCONE, CPA P.A  
55 NE 5TH AVENUE  
501  
BOCA RATON, FL 33432 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  
Name: VOLPE, VITO  
Address: 1441 SW 19TH STREET  
City-St-Zip: BOCA RATON, FL 33486

Title: MGR  
Name: CAPPONI, ANDREA  
Address: VIA BARBARANA 21 63040 FOLIGNANO  
City-St-Zip: ASCOLI, PICENO, PC 99999 IT

Title: MGR  
Name: ALESSANDRINI, GIOVANNI B  
Address: VIA VALLI, 242/C  
City-St-Zip: ASCOLI PICENO, PC 63100 IT

Title: MGR  
Name: CANCIAN, ROBERT  
Address: 303-3035 ERNEST HEMINGWAY  
City-St-Zip: ST. LAURENT HR-OA9, QC 99999 CA

I hereby 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: VITO VOLPE

PT

04/09/2010

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