

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

**APPROVED  
AND  
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**95 MAY -1 AM 9:31**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

**CORPORATION  
ANNUAL REPORT  
1995**



**FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS**

**DOCUMENT # M59424**  
1. Corporation Name  
**GIANELLA CORPORATION**

Principal Place of Business      Mailing Address  
**630 Michigan Ave.      1321 ALTON ROAD**  
**Miami Beach, FL      MIAMI BEACH, FL**  
**33139      33139**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	3a. Date of Last Report
21 1321 ALTON RD.	26	9-21-87	5-12-94
Suite, Apt. #, etc.	Suite, Apt. #, etc.	4. FEI Number	Applied For
22	27	65-0008181	Not Applicable
City & State	City & State	5. Certificate of Status Desired	\$8.75 Additional Fee Required
23 Miami Beach, FL	28	<input type="checkbox"/>	\$5.00 May Be Added to Fees
ZIP	Country	29	30
24 33139	25 US	8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
KOBT KARP 630 MICHIGAN AVE. MIAMI BEACH, FL 33139		KIT&S REGISTERED AGENT CORP. 1401 BRICKELL AVE. #700 MIAMI FL 33131	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Michael Kosnitsky, MICHAEL KOSNITSKY, PRES OF KIT&S 2/28/95

(NOTE: Registered Agent signature required when registering.)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STREET ADDRESS	1.2 NAME	
CITY, ST, ZIP		1.3 STREET ADDRESS	
		1.4 CITY, ST, ZIP	
TITLE	NAME	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	STREET ADDRESS	2.2 NAME	
CITY, ST, ZIP		2.3 STREET ADDRESS	
		2.4 CITY, ST, ZIP	
TITLE	NAME	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STREET ADDRESS	3.2 NAME	
CITY, ST, ZIP		3.3 STREET ADDRESS	
		3.4 CITY, ST, ZIP	
TITLE	NAME	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STREET ADDRESS	4.2 NAME	
CITY, ST, ZIP		4.3 STREET ADDRESS	
		4.4 CITY, ST, ZIP	
TITLE	NAME	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STREET ADDRESS	5.2 NAME	
CITY, ST, ZIP		5.3 STREET ADDRESS	
		5.4 CITY, ST, ZIP	
TITLE	NAME	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STREET ADDRESS	6.2 NAME	
CITY, ST, ZIP		6.3 STREET ADDRESS	
		6.4 CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110 (3729)(a), Florida Statutes. I further certify that the information included on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if each name were that of 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Lane Petti Grew      3/2/95 (305) 673-0719

SECRETARY