

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003738

FILED
Mar 12, 2004
Secretary of State**Entity Name:** CASA PER I BAMBINI FOUNDATION, INC.**Current Principal Place of Business:**5501 LAKESIDE DRIVE
APT. 202
MARGATE, FL 33063**New Principal Place of Business:****Current Mailing Address:**5501 LAKESIDE DRIVE
APT. 202
MARGATE, FL 33063**New Mailing Address:****FEI Number:** 65-1012054**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**PIRAINO, GIACOMO R
5501 LAKESIDE DRIVE
APT. 202
MARGATE, FL 33063 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**OFFICERS AND DIRECTORS:**

Title: D () Delete
Name: MARTINO, JOHN
Address: 304 NASON LANE
City-St-Zip: NAPLES, FL 34112

Title: D () Delete
Name: CUNNINGHAM, JIM
Address: 5487 PINE LANE
City-St-Zip: POMPANO BEACH, FL 33067

Title: PD () Delete
Name: PIRAINO, GIACOMO REMO
Address: 5501 LAKESIDE DRIVE APT. 202
City-St-Zip: MARGATE, FL 33063

Title: D (X) Delete
Name: SIEGEL, RICHARD
Address: 45065 S. OCEAN BLVD . #1106
City-St-Zip: BOCA RATON, FL 33487

Title: D () Delete
Name: LEE, DONNA
Address: 5384 FOX VALLEY TRAIL
City-St-Zip: LAKE WORTH, FL 33463

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GIACOMO PIRAINO

PRES

03/12/2004

Electronic Signature of Signing Officer or Director_____
Date