

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005007

FILED  
Apr 28, 2008  
Secretary of State

Entity Name: ITTA CHARITIES CORP.

## Current Principal Place of Business:

4382 MAHOGANY RIDGE DR.  
WESTON, FL 33331

## New Principal Place of Business:

## Current Mailing Address:

4382 MAHOGANY RIDGE DR.  
WESTON, FL 33331

## New Mailing Address:

FEI Number: 41-2157514

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MAZZEI, GLADYS E  
4382 MAHOGANY RIDGE DR.  
WESTON, FL 33331 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: DPT ( ) Delete  
Name: MAZZEI, GLADYS E  
Address: 4382 MAHOGANY RIDGE ROAD  
City-St-Zip: WESTON, FL 33331

Title: DVP ( ) Delete  
Name: HENAO, CONSUELO  
Address: 109 LAFAYETTE ST  
City-St-Zip: TAPPAN, NY 10983

Title: S ( ) Delete  
Name: MAZZEI, EDMUND JR.  
Address: 4382 MAHOGANY RIDGE ROAD  
City-St-Zip: WESTON, FL 33331

Title: D (X) Delete  
Name: HEAGY, RICHARD  
Address: 10 FAIRWAY DRIVE #207  
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: DVP (X) Delete  
Name: PENA, SANDRA  
Address: 12625 NW 11 CT  
City-St-Zip: SUNRISE, FL 33323

Title: D ( ) Delete  
Name: MATILDE, GLORIA  
Address: 7200 RADICE CT APT 803  
City-St-Zip: LAUDERHILL, FL 33319

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition  
Name: RAMOS, LEONARDO  
Address: 273 CONSERVATION DR.  
City-St-Zip: WESTON, FL 33327

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

SIGNATURE: GLADYS E MAZZEI

P

04/28/2008

Electronic Signature of Signing Officer or Director

Date