

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000002602

FILED
Mar 13, 2007
Secretary of State

Entity Name: THE SICILIAN CULTURAL AND FILM FESTIVAL, INC.

Current Principal Place of Business:

1320 S. DIXIE HWY, #1275, GABLES ONE TOWER
C/O MELVIN C. MORGENSTERN, P.A.
CORAL GABLES, FL 33146

New Principal Place of Business:

9400 SOUTH DADELAND BOULEVARD
600
MIAMI, FL 33156

Current Mailing Address:

1320 S. DIXIE HWY, #1275, GABLES ONE TOWER
C/O MELVIN C. MORGENSTERN, P.A.
CORAL GABLES, FL 33146

New Mailing Address:

9400 SOUTH DADELAND BOULEVARD
600
MIAMI, FL 33156

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MELVIN C. MORGENSTERN, P.A.
1320 S. DIXIE HWY, #1275, GABLES ONE TOWER
C/O MELVIN C. MORGENSTERN, P.A.
CORAL GABLES, FL 33146 US

Name and Address of New Registered Agent:

MELVIN C. MORGENSTERN, P.A.
9400 SOUTH DADELAND BOULEVARD
600
MIAMI, FL 33156 US

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:

03/13/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: VISCUSO, EMANUELE MR.
Address: 1320 S. DIXIE HWY, #1275, GABLES ONE TOWER
City-St-Zip: CORAL GABLES, FL 33146

Title: D () Delete
Name: GULLIK, TANYA MS.
Address: 1320 S. DIXIE HWY, #1275, GABLES ONE TOWER
City-St-Zip: CORAL GABLES, FL 33146

Title: D () Delete
Name: CATANIA, SALVATORE MR.
Address: 1320 S. DIXIE HWY, #1275, GABLES ONE TOWER
City-St-Zip: CORAL GABLES, FL 33146

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: VISCUSO, EMANUELE MR.
Address: 8300 HAWTHORNE AVENUE
City-St-Zip: MIAMI BEACH, FL 33141

Title: D (X) Change () Addition
Name: GULLIK, TANYA MS.
Address: 1365 DAYTONIA ROAD
City-St-Zip: MIAMI BEACH, FL 33141

Title: D (X) Change () Addition
Name: CATANIA, SALVATORE MR.
Address: 5600 COLLINS AVENUE APT 12-B
City-St-Zip: MIAMI BEACH, FL 33140

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 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: MELVIN C MORGENSTERN

RA

03/13/2007

Electronic Signature of Signing Officer or Director

Date