

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24725

FILED
May 07, 2006
Secretary of State

Entity Name: ASSOCIAZIONE LIGURI NEL MONDO-FLORIDA, INC.

Current Principal Place of Business:

799 BRICKELL PLAZA
900
MIAMI, FL 33131 US

New Principal Place of Business:

601 BRICKELL KEY DRIVE
705
MIAMI, FL 33131 US

Current Mailing Address:

799 BRICKELL PLAZA
900
MIAMI, FL 33131 US

New Mailing Address:

601 BRICKELL KEY DRIVE
705
MIAMI, FL 33131 US

FEI Number: 65-0049726 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

COSTABEL, ATTILIO M
12324 ROCK GARDEN LANE
MIAMI, FL 33132 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: PD () Delete
Name: COSTABEL, ATTILIO M.,
Address: 799 BRICKELL PLAZA, #900
City-St-Zip: MIAMI, FL 33131

Title: D () Delete
Name: AMUDSEN, RITA,
Address: 151 CRANDON BLVD.
City-St-Zip: KEY BISCAVNE, FL

Title: D () Delete
Name: DODERO, PIETRO
Address: 6001 NE 19 AVE
City-St-Zip: FT. LAUDERDALE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: COSTABEL, ATTILIO M.,
Address: 601 BRICKELL KEY DRIVE #705
City-St-Zip: MIAMI, FL 33131

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 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: ATTILIO M COSTABEL

PD

05/07/2006

Electronic Signature of Signing Officer or Director

Date