

2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Mar 14, 2006
Secretary of State

DOCUMENT# N97000006443

Entity Name: SOCIETA DANTE ALIGHIERI D'ITALIA, INC.**Current Principal Place of Business:**1414 CORAL WAY
MIAMI, FL 33145 US**New Principal Place of Business:****Current Mailing Address:**1414 CORAL WAY
MIAMI, FL 33145 US**New Mailing Address:****FEI Number:** 65-0847665**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**PASTOR, CLAUDIO
825 BRIKELL BAY DRIVE
#644
MIAMI, FL 33133 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: PASTOR, CLAUDIO
Address: 825 BRIKELL BAY DRIVE #644
City-St-Zip: MIAMI, FL 33133**Title:** D (X) Delete
Name: RUSSELL, EDITH
Address: 2907 S.W. 2 AVE.
City-St-Zip: MIAMI, FL 33129**Title:** D () Delete
Name: FELICIONI, EUGENIA
Address: 751 S.W. 113 WAY
City-St-Zip: PEMBROKE PINES, FL 33025**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:

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: CLAUDIO PASTOR

D

03/14/2006

Electronic Signature of Signing Officer or Director_____
Date