

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000014127

1. Entity Name

ARIETETOUR.COM, INC.

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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01 JUL -6 AM 9:04

Principal Place of Business
**200 S. Biscayne Blvd
Suite 4815
Miami, FL 33131**

Mailing Address
**200 S. Biscayne Blvd.
Suite 4815
Miami, FL 33131**

2. Principal Place of Business
1548 Brickell Ave.

3. Mailing Address
1548 Brickell Ave.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE
05/03/01 91129 031 *150

City & State
Miami, FL

City & State
Miami, FL

4. FEI Number
65-0989038

Applied For
 Not Applicable

Zip Country Zip Country
33129-1210 USA 3319-1210 USA

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**Salussolia, Piero
200 S. Biscayne Blvd.
Suite 4815
Miami, FL 33131**

7. Name and Address of New Registered Agent

Name
Salussolia, Piero

Street Address (P.O. Box Number is Not Acceptable)
1548 Brickell Ave.

City
Miami

FL Zip Code
33129-1210

8. 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 *[Signature]* **Piero Salussolia** DATE **07/02/01**

Signature: typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE D	<input type="checkbox"/> Delete	TITLE DP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME Mauro, Massimiliano		NAME MAURO, MASSIMILIANO	
STREET ADDRESS Calle Fermin Edifo Suites Andreola A		STREET ADDRESS CALLE FERMIN EDIFO SUITE ANDREOLA APT.2B	
CITY-STATE-ZIP Apt.2B- Polaramar Isla Margrita, VE		CITY-STATE-ZIP PORTLAMAR, ISLA MARGRITA, VE	
TITLE 	<input type="checkbox"/> Delete	TITLE TS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME 		NAME FERNANDEZ SERRA, BEATRIZ	
STREET ADDRESS 		STREET ADDRESS CALLE FERMIN EDIFO SUITE ANDREOLA APT. 2B	
CITY-STATE-ZIP 		CITY-STATE-ZIP PORTLAMAR, ISLA MARGRITA, VE	
TITLE 	<input type="checkbox"/> Delete	TITLE AS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME 		NAME MANCA, MARCELLA	
STREET ADDRESS 		STREET ADDRESS 1548 BRICKELL AVE.	
CITY-STATE-ZIP 		CITY-STATE-ZIP MIAMI, FL 33129-1210	
TITLE 	<input type="checkbox"/> Delete	TITLE 	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME 		NAME 	
STREET ADDRESS 		STREET ADDRESS 	
CITY-STATE-ZIP 		CITY-STATE-ZIP 	
TITLE 	<input type="checkbox"/> Delete	TITLE 	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME 		NAME 	
STREET ADDRESS 		STREET ADDRESS 	
CITY-STATE-ZIP 		CITY-STATE-ZIP 	

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(a), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE: *[Signature]* **Marcella Manca, Assistant Secretary** DATE **07/02/01**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

UBR/11/00

SALUSSOLIA
ASSOCIATES
ATTORNEYS AT LAW

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FIRST UNION FINANCIAL CENTER
200 S. BISCAYNE BLVD. • SUITE 4815
MIAMI, FLORIDA 33131

TELEPHONE: (305) 373-7016
FACSIMILE: (305) 373-7017
E-MAIL: SALUSSOLIA@AOL.COM

July 2, 2001

Via Certified Mail

FLORIDA DEPARTMENT OF STATE
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re: Uniform Business Report Forms for PEA HOLDING, INC., GRUPPO GALILEO, CORP., ARIETETOUR.COM INC., and ACQUA DI PARMA, INC.

Dear Sir/Madam:

Please be informed that the uniform business reports for the above companies were filed respectively on April 26, 2001 for PEA Holding, Inc., Gruppo Galileo, Corp. and on April 30, 2001 for Arietetour.com, Inc., and Acqua di Parma, Inc., along with the proper fees.


Also, please be informed that today we received a notice from the Department of State regarding the above referenced companies, a copy of which are enclosed herewith, requesting that such companies file the uniform business reports and pay the appropriate fees in the amount of \$550.00 each one. We immediately contacted the Division of Corporations, and one of your representatives informed us that we should have received a "correction notice" for each of the above companies because the FEI Numbers were missing. However, as of today, we have not received such notices. In this regard, enclosed herewith please find a new business report form for each of the above mentioned companies as amended to reflect the FEI Number.

As per the foregoing, we kindly request that the enclosed business report forms be filed, and that no late penalty fees be applied.

Your attention to this matter is greatly appreciated, and should you have any questions regarding the above, please do not hesitate to contact our office.

Very truly yours,

SALUSSOLIA & ASSOCIATES


Stefania Bologna, Esq.