

FILED
May 29, 2002 8:00 am
Secretary of State

05-07-2002 90253 026 ***150.00

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P0000058515

1. Entity Name
CORDELLA, INC.

Principal Place of Business
1105 CAPE CORAL PARKWAY E. SUITE C
CAPE CORAL FL 33904

Mailing Address
1105 CAPE CORAL PARKWAY E. SUITE C
CAPE CORAL FL 33904



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
1172 ESTERO Boulevard
Suite, Apt. #, etc.
LIMIT 1
City & State
FORT MYERS BEACH
Zip 33931 Country FL

3. Mailing Address
1172 ESTERO Boulevard
Suite, Apt. #, etc.
LIMIT 1
City & State
FORT MYERS BEACH
Zip 33931 Country FL

4. FEI Number 65-1024092 Applied For Not Applicable

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

6. Name and Address of Current Registered Agent
WRIGHT, CHRISTINE F
1105 CAPE CORAL PARKWAY E, SUITE C
CAPE CORAL FL 33904

7. Name and Address of New Registered Agent
Name: CORDELLA, Emilia
Street Address (P.O.-Box Number is Not Acceptable):
1172 ESTERO Blvd, Unit 1
City: FORT MYERS Beach FL Zip Code: 33931

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: *Emilia Cordella* Emilia Cordella DATE: 05/17/02
Signature, typed or printed name of registered agent and use 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, 2002 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

TITLE	D	NAME	CORDELLA, GIAN F	<input type="checkbox"/> Delete
STREET ADDRESS			PFEILSTR 31	
CITY-ST-ZIP			42289 WUPPERTAL GERMANY	
TITLE	D	NAME	CORDELLA, EMLIA	<input type="checkbox"/> Delete
STREET ADDRESS			PFEILSTR 31	
CITY-ST-ZIP			42289 WUPPERTAL GERMANY	
TITLE		NAME	WRIGHT, Christine F	<input checked="" type="checkbox"/> Delete
STREET ADDRESS			1105 CAPE CORAL PARKWAY E, SUITE C	
CITY-ST-ZIP			CAPE CORAL FL 33904	
TITLE		NAME		<input type="checkbox"/> Delete
STREET ADDRESS				
CITY-ST-ZIP				
TITLE		NAME		<input type="checkbox"/> Delete
STREET ADDRESS				
CITY-ST-ZIP				
TITLE		NAME		<input type="checkbox"/> Delete
STREET ADDRESS				
CITY-ST-ZIP				

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	NAME	CORDELLA, GIAN F	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS			RDEPKESIR. 29	
CITY-ST-ZIP			42119 Wuppertal GERMANY	
TITLE	D	NAME	CORDELLA EMILIA	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS			1172 ESTERO BLVD, UNIT 1	
CITY-ST-ZIP			FORT MYERS BEACH, FL 33931	
TITLE		NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS				
CITY-ST-ZIP				
TITLE		NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS				
CITY-ST-ZIP				
TITLE		NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS				
CITY-ST-ZIP				

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *Emilia Cordella* CORDELLA, EMILIA 04/29/02 (941)7654099
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)