

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 18, 2007 8:00 am
Secretary of State

05-18-2007 90020 030 ***150.00

DOCUMENT # P01000024763



1. Entity Name
SARIMPORT, INC.

Principal Place of Business
180 NE 39 STREET, SUITE 106
MIAMI, FL 33137

Mailing Address
180 NE 39 STREET, SUITE 106
MIAMI, FL 33137

2. Principal Place of Business - No P.O. Box #
2144 N.E. 2nd AVE
Suite, Apt. #, etc.

3. Mailing Address
2144 N.E. 2nd AVE.
Suite, Apt. #, etc.



05092007 Chg-P CR2E034 (12/06)

City & State
MIAMI, FL

City & State
MIAMI, FL

4. FEI Number
65-1091044

Applied For
Not Applicable

Zip
33137

Country

Zip
33137

Country

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

6. Name and Address of Current Registered Agent

ESTRELLA, DAVID ESQ.
3191 CORAL WAY
SUITE 114
MIAMI, FL 33145

7. Name and Address of New Registered Agent

Name
LASIO, GIANCARLO

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

2144 N.E. 2nd AVE.

City
MIAMI

FL

Zip Code
33137

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Giancarlo Lasio GIANCARLO LASIO

5/16/07

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
Due by September 14, 2007

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PVSD
LASIO, GIANCARLO
180 NE 39 STREET, SUITE 106
MIAMI, FL 33137 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PVSD
LASIO, GIANCARLO
2144 N.E. 2nd AVE.
MIAMI, FL 33137 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Giancarlo Lasio GIANCARLO LASIO

5/16/07

305-572-0990

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #