

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Mar 07, 2008
Secretary of State**

DOCUMENT# P01000079846

Entity Name: 77-FLORIDA, INC.

Current Principal Place of Business:

1560 LENOX AVENUE
SUITE 102
MIAMI BEACH, FL 33139 US

New Principal Place of Business:

Current Mailing Address:

1560 LENOX AVENUE
SUITE 102
MIAMI BEACH, FL 33139 US

New Mailing Address:

FEI Number: 01-0577663 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARELLI, ALESSIA
1560 LENOX AVENUE
SUITE 102
MIAMI BEACH, FL 33139 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: LANZALONE, LUCA
Address: PALAZZO SALUZZO PIAZZA DEI GIUSTINIANI 7/D
City-St-Zip: GENOVA, IT 16123 IT

Title: PTS () Delete
Name: LANZALONE, LUCA
Address: PALAZZO SALUZZO PIAZZA DEI GIUSTINIANI 7D
City-St-Zip: GENOVA, IT 16123 IT

Title: AS () Delete
Name: MARELLI, ALESSIA
Address: 1560 LENOX AVENUE SUITE102
City-St-Zip: MIAMI BEACH, FL 33139 US

Title: () Delete
Name:
Address:
City-St-Zip:

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:

Title: VP () Change (X) Addition
Name: TIRADO, MONICA
Address: 1410 20TH STREET UNIT 214
City-St-Zip: MIAMI BEACH, FL 33139

I hereby certify that the information supplied with this filing does not qualify 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LUCA LANZALONE

PTS

03/07/2008

Electronic Signature of Signing Officer or Director

Date