

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2007 8:00 am
Secretary of State

04-17-2007 90235 012 ***158.75

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1. Entity Name
CAVUROTTO USA, INC.



Principal Place of Business
1102 LINCOLN ROAD
MIAMI BEACH, FL 33139-2425 US

Mailing Address
1102 LINCOLN ROAD
MIAMI BEACH, FL 33139-2425 US

40065933



01252007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
73-1629836

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

FERNANDEZ, LUIS LUCAS
366 MINORCA AVENUE
CORAL GABLES, FL 33134-4304

**DO NOT WRITE
IN THIS SPACE**

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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	CERUTII, SACHA A
STREET ADDRESS	1102 LINCOLN ROAD
CITY-ST-ZIP	MIAMI BEACH, FL 331392425
TITLE	D
NAME	CERUTI, GIANMARCO
STREET ADDRESS	1102 LINCOLN ROAD
CITY-ST-ZIP	MIAMI BEACH, FL 331392425
TITLE	VP
NAME	QUEVENTER, ROBERTO
STREET ADDRESS	1102 LINCOLN ROAD
CITY-ST-ZIP	MIAMI BEACH, FL 331392425
TITLE	ST
NAME	KURKOU, NADIA
STREET ADDRESS	1102 LINCOLN ROAD
CITY-ST-ZIP	MIAMI BEACH, FL 331392425
TITLE	AS
NAME	FERNANDEZ, LUIS LUCAS
STREET ADDRESS	366 MINORCA AVENUE
CITY-ST-ZIP	CORAL GABLES, FL 331344304
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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: NADIA KURKOU
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/05/07
Date

Daytime Phone #