


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 09, 2007 08:00 AM
Secretary of State

DOCUMENT # P02000049221 1. Entity Name VILLAGIO ENTERPRISES INC.	
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Principal Place of Business 8600 SW 86 AVENUE MIAMI, FL 33143	Mailing Address PO BOX 145035 CORAL GABLES, FL 33114-5035
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01182007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE


4. FEI Number 01-0681147	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**TASSI, GIANFRANCO
8600 SW 86 AVENUE
MIAMI, FL 33143**

**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  **GIANFRANCO TASSI** **4/3/07**
Signature, typed or printed name of registered agent and the Approver. (NOTE: Registered Agent Signature is required when submitting) DATE


FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U00000694892 04/17/07-80037-018 158.75
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD TASSI, GIANFRANCO 8600 SW 86 AVENUE MIAMI, FL 33143
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD TASSI, MARIA A 8600 SW 86 AVENUE MIAMI, FL 33143
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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:  **(GIANFRANCO TASSI)** **4/3/07 (305) 2730941**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE DAY/MO/YR