

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000051534

Entity Name: GIARDINETTO, CORP.

FILED  
Apr 22, 2005  
Secretary of State

## Current Principal Place of Business:

5101 GLENMOOR DR.  
APT. 5101  
WEST PALM BEACH, FL 33409

## Current Mailing Address:

5101 GLENMOOR DR.  
APT. 5101  
WEST PALM BEACH, FL 33409

## New Principal Place of Business:

1368 SUMIT PINES BLVD  
APT. 310  
WEST PALM BEACH, FL 33415

## New Mailing Address:

1368 SUMIT PINES BLVD  
APT. 310  
WEST PALM BEACH, FL 33415

FEI Number: 03-0442880

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

NEINER, NORMA G  
5101 GLEMOOR DR.  
WEST PALM BEACH, FL 33409 US

## Name and Address of New Registered Agent:

NEINER, NORMA G  
1368 SUMIT PINES BLVD  
APT.310  
WEST PALM BEACH, FL 33415 US

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:

04/22/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: NEINER, NORAM G  
Address: 5101 GLENMOOR DR.  
City-St-Zip: WEST PALM BEACH, FL 33409

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: NEINER, NORMA G  
Address: 1368 SUMIT PINES BLVD  
City-St-Zip: WEST PALM BEACH, FL 33415

Title: S ( ) Change (X) Addition  
Name: PICCIONI, SANDRO A  
Address: 1368 SUMIT PINES BLVD  
City-St-Zip: WEST PALM BEACH, FL 33415

I hereby certify that the information supplied with this filing does not qualify for the 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 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: NEINER NORMA G

D

04/22/2005

Electronic Signature of Signing Officer or Director

Date