## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000071611

Entity Name: ANDIAMO TEAM, INC.

**FILED** Apr 30, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

2400 EAST COMMERICAL BLVD STE 709 BROWARD FINANCIAL CENTRE FT. LAUDERDALE, FL 33308

**SUITE 1950** 

FT. LAUDERDALE, FL 33394

**Current Mailing Address: New Mailing Address:** 

614 DELAFIELD AVENUE STATEN ISLAND, NY 10310

FEI Number: 13-4203272 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GORE, LAURENCE D ESQ HAMAWAY, MICHAEL ESQ. 2400 EAST COMMERCIAL BLVD., STE. 709 BROWARD FINANCIAL CENTRE FT. LAUDERDALE, FL 33308 SUITE 1950

FT. LAUDERDALE, FL 33394 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: MICHAEL HAMAWAY 04/30/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title:

Name:

Address:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

( ) Delete Title: (X) Change ( ) Addition MONICI, MARCELLO Name: DOYLE, THERESA 614 DELAFIELD AVENUE 614 DELAFIELD AVENUE Address: City-St-Zip:

STATEN ISLAND, NY 10310 City-St-Zip: STATEN ISLAND, NY 10310

Title: ٧S Title: () Change () Addition () Delete Name: DOYLE, THERESA Name: 614 DELAFIELD AVENUE Address: Address: STATEN ISLAND, NY 10310 City-St-Zip: City-St-Zip:

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: THERESA DOYLE PTD 04/30/2008