

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000107278

Entity Name: ITALIAN GROUP, INC.

FILED
May 02, 2005
Secretary of State

Current Principal Place of Business:

3909 N.E. 163RD STREET
NORTH MIAMI BEACH, FL 33160

New Principal Place of Business:

Current Mailing Address:

3909 N.E. 163RD STREET
NORTH MIAMI BEACH, FL 33160

New Mailing Address:

FEI Number: 59-2599788

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRIMSLEY, CHARLES J
3909 N.E. 163RD STREET
NORTH MIAMI BEACH, FL 33160 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GIANCATERINI, MARCELLO
Address: 18090 COLLINS AVENUE
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: SD () Delete
Name: GIANCATERINI, MARY
Address: 18090 COLLINS AVENUE
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: D () Delete
Name: PARILLO, RICHARD P JR.
Address: 3909 NE 163RD ST.
City-St-Zip: NORTH MIAMI BEACH, FL 33160

Title: D () Delete
Name: PARRILLO, BEAU W
Address: 3909 NE 163RD ST.
City-St-Zip: NORTH MIAMI BEACH, FL 33160

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: GIANCATERINI, MARY
Address: 18090 COLLINS AVENUE
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD () Change (X) Addition
Name: GRIMSLEY, CHARLES J
Address: 3909 N.E. 163RD ST.
City-St-Zip: NORTH MIAMI BEACH, FL 33160

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: CHARLES J. GRIMSLEY

SD

05/02/2005

Electronic Signature of Signing Officer or Director

_____ Date