

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000124853

FILED
Mar 10, 2008
Secretary of State

Entity Name: NINE ISLAND ASSOCIATES, INC.

Current Principal Place of Business:

9 ISLAND AVENUE
UNIT 2304
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

9 ISLAND AVENUE
UNIT 2304
MIAMI BEACH, FL 33139

New Mailing Address:

FEI Number: 90-0067511

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PIERO SALUSSOLIA CORPORATE MANAGEMENT, INC
1548 BRICKELL AVENUE
MIAMI, FL 33129 US

Name and Address of New Registered Agent:

PIERO SALUSSOLIA CORPORATE MANAGEMENT, INC
1410 20TH STREET
UNIT 214
MIAMI BEACH, FL 33139 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: PIERO SALUSSOLIA

03/10/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BORGOMANERO, GIANPAOLO
Address: 9 ISLAND AVENUE #2304
City-St-Zip: MIAMI BEACH, FL 33139 US

Title: P,T () Delete
Name: BORGOMANERO, GIANPAOLO
Address: 9 ISLAND AVE. #2304
City-St-Zip: MIAMI BEACH, FL 33139 US

Title: VP () Delete
Name: BORGOMANERO, MARTINA
Address: VIA D'AZZELIO 21
City-St-Zip: BOLOGNA, BO 40123 IT

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: () Change () Addition
Name:
Address:
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: BORGOMANERO GIANPAOLO

DPT

03/10/2008

Electronic Signature of Signing Officer or Director

Date