## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000103600

**Entity Name: MIGLIORE ITALIA INC.** 

FILED Feb 28, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 4200 COMMUNITY DR APT 402 W PALM BCH, FL 33409 **Current Mailing Address: New Mailing Address:** 4200 COMMUNITY DR APT 402 1613 WOODBRIDGE LAKES CIR. W PALM BCH, FL 33409 W PALM BCH, FL 33405 FEI Number: 52-2412630 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: MIGLIORE, MASSIMILIANO MIGLIORE, MASSIMILIANO 1613 WOÓDBRIDGE LAKES CIR. 4200 COMMUNITY DR APT 402 W PALM BCH, FL 33409 W PALM BCH, FL 33405 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: 02/28/2006 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition Title: ( ) Delete MASSIMILIANO, MIGLORE Name: Name: 4200 COMMUNITY DR APT 402 Address: Address: City-St-Zip: WEST PALM BEACH, FL 33409 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: MASSIMILIANO MIGLIORE PRE 02/28/2006