2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000112195

Entity Name: GALLIANI & ZAFFANI CORPORATION

FILED Apr 10, 2006 Secretary of State

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

12268 ACCIPITER DR. 13789 SW 66 ST APT F177

ORLANDO, FL 32837 MIAMI, FL 33183

Current Mailing Address: New Mailing Address:

12268 ACCIPITER DR. 13789 SW 66 ST APT F177

ORLANDO, FL 32837 MIAMI, FL 33183

FEI Number: 80-0078377 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:

ZAFFANI, JOSE T

6214, STEVENSON DR APT 303

6214, STEVENSON DR APT 303

6214, STEVENSON DR APT 303

631489 SW 66 ST APT F177

63183 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: GIANCARLO GALLIANI 04/10/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT () Delete Title: DPT (X) Change () Addition
Name: ZAFFANI, JOSE T Name: GALLIANI, GIANCARLO
Address: 12789 ACCIDITED DR

 Address:
 12268 ACCIPITER DR.
 Address:
 13789 SW 66 ST APT F177

 City-St-Zip:
 ORLANDO, FL 32837
 City-St-Zip:
 MIAMI, FL 33183

Title: DVPS () Delete Title: DVPS (X) Change () Addition

Name: GALLIANI, GIANCARLO Name: GALLIANI, CAMILA
Address: 9856 NORTH KENDALL DR., APT. K309 Address: 13789 SW 66 ST APT F177

City-St-Zip: MIAMI, FL 33176 City-St-Zip: MIAMI, FL 33183

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: GIANCARLO GALLIANI P 04/10/2006