

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000133691

Entity Name: CRIGARO, INC

FILED
Apr 27, 2007
Secretary of State

Current Principal Place of Business:

121 CREEK HOLLOW LANE
MIDDLEBURG, FL 32068 US

New Principal Place of Business:

Current Mailing Address:

121 CREEK HOLLOW LANE
MIDDLEBURG, FL 32068 US

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MENDHI, GABRIELE
121 CREEK HOLLOW LANE
MIDDLEBURG, FL 32068 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: P () Delete
Name: MENDHI, GABRIELE
Address: 121 CREEK HOLLOW LANE
City-St-Zip: MIDDLEBURG, FL 32068 US

Title: VP () Delete
Name: HEISLER, ROBERT
Address: 404 SOUTH BEACH ST, #1201
City-St-Zip: DAYTONA BEACH, FL 32114 US

Title: TREA () Delete
Name: MARTIN, CHRISTINE
Address: 2543 IRONWOOD CT.
City-St-Zip: ORANGE PARK, FL 32065 US

Title: SEC () Delete
Name: WILSON, GREGORY
Address: 121 CREEK HOLLOW LANE
City-St-Zip: MIDDLEBURG, FL 32068 US

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

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

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:

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

Title: OF. () Change (X) Addition
Name: JIMENEZ, MARLON R
Address: 8762 PINEHAMMOCK CT
City-St-Zip: JACKSONVILLE,, FL 32244 US

Title: OF () Change (X) Addition
Name: JIMENEZ, MARIA L
Address: 8762 PINEHAMMOCK CT
City-St-Zip: JACKSONVILLE, FL 32244 US

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: GABRIELE MENDHI

P

04/27/2007

Electronic Signature of Signing Officer or Director

Date