

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000141611

FILED
Feb 22, 2005
Secretary of State

Entity Name: CASSONE HOME STYLE INC.

Current Principal Place of Business:

14513 KAISER CT
ORLANDO, FL 32826

New Principal Place of Business:

617 VIRGINIA DR.
ORLANDO, FL 32803

Current Mailing Address:

14513 KAISER CT
ORLANDO, FL 32826

New Mailing Address:

617 VIRGINIA DR.
ORLANDO, FL 32803

FEI Number: 20-0525332

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARDONNE, LUIS
14513 KAISER CT
ORLANDO, FL 32826 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: PT () Delete
Name: CARDONNE, LUIS
Address: 14513 KAISER CT
City-St-Zip: ORLANDO, FL 32826

Title: VP () Delete
Name: OJEDA, RAUL
Address: 14513 KAISER CT
City-St-Zip: ORLANDO, FL 32826

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: LUIS CARDONNE

PT

02/22/2005

Electronic Signature of Signing Officer or Director

Date