2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000130869

City-St-Zip:

DAVIE, FL 33314

Entity Name: BIANCHI & CECCHI SERVICE, INC.

FILED Jan 16, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4380 OAKES RD STE 804 920 NW 10 AV **DAVIE, FL 33314** FORT LAUDERDALE, FL 33311 **Current Mailing Address: New Mailing Address:** 4380 OAKES RD STE 804 920 NW 10 AV DAVIE, FL 33314 FORT LAUDERDALE, FL 33311 FEI Number: 20-1655706 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: GUTTA, KOUTOULAS & RELIS, LLC KOUTOULAS & RELIS, LLC 1776 PINE ISLAND ROAD 8211 W BROWARD BLVD STÉ 350 PLANTATION, FL 33324 SUITE 316 PLANTATION, FL 33322 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: GREGORY KOUTOULAS 01/16/2007 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition BIANCHI, ALFREDO Name: Name: VIA AURELIA DI LEVANTE 27, COGOLETO Address: Address: City-St-Zip: GENOVA, ITALY, OC City-St-Zip: () Delete Title: Title: () Change () Addition VALERIO, GIAN LUCA Name: Name: VIA ACQUARONE 24/12 Address: Address: GENOVA, ITALY, City-St-Zip: City-St-Zip: () Delete Title: Title: (X) Change () Addition TRAVERSO, EUGENIO EXEC-V Name: TRAVERSO, EUGENIO EXEC-V Name: 4380 OAKES RD., SUITE 804 920 NW 10 AV Address: Address:

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.

City-St-Zip:

FORT LAUDERDALE, FL 33311

SIGNATURE: ALFREDO BIANCHI PD 01/16/2007