

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000134122

FILED  
Jan 08, 2007  
Secretary of State

Entity Name: D'GIO INTERNATIONAL INC.

## Current Principal Place of Business:

12801 WEST SUNRISE BLVD  
8013  
SUNRISE, FL 33325

## New Principal Place of Business:

## New Mailing Address:

12620 VISTA ISLE DR  
1028  
PLANTATION, FL 33325

## Current Mailing Address:

PO BOX 550016  
FORT LAUDERDALE, FL 33355

FEI Number: 51-0525694

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MOLLINEDO, GIOVANNA L  
12620 VISTA ISLE DRIVE  
1028  
SUNRISE, FL 33325 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: MOLLINEDO, GIOVANNA L  
Address: 12620 VISTA ISLE DRIVE  
City-St-Zip: SUNRISE, FL 33323

Title: PM ( ) Delete  
Name: GADEA, DAVID R  
Address: 12620 VISTA ISLE DRIVE, #1028  
City-St-Zip: SUNRISE, FL 33325

Title: SM (X) Delete  
Name: ANDREU, ANA  
Address: 15734 SW 112 LANE  
City-St-Zip: MIAMI, FL 33196

Title: SP (X) Delete  
Name: RUIZ, JUANA C  
Address: 501 RACQUET CLUB ROAD UNIT 63  
City-St-Zip: WESTON, FL 33326

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: MOLLINEDO, GIOVANNA L  
Address: 12620 VISTA ISLE DRIVE  
City-St-Zip: SUNRISE, FL 33325

Title: SP (X) Change ( ) Addition  
Name: GADEA, DAVID R  
Address: 12620 VISTA ISLE DRIVE, #1028  
City-St-Zip: SUNRISE, FL 33325

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 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: GIOVANNA MOLLINEDO

P

01/08/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date