

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000167060

Entity Name: FRANOSA USA INC.

FILED
Jul 08, 2007
Secretary of State

Current Principal Place of Business:

206 2ND ST
BONITA SPRINGS, FL 34134

New Principal Place of Business:

2059 MONROE AVE
APT 8
NAPLES, FL 34112

Current Mailing Address:

206 2ND ST
BONITA SPRINGS, FL 34134

New Mailing Address:

P O BOX 1855
BONITA SPRINGS, FL 34133

FEI Number: 20-2340002

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEAVITT, LESTER J
206 2ND ST
BONITA SPRINGS, FL 34134 US

Name and Address of New Registered Agent:

LEAVITT, BARBARA J VP
2059 MONROE AVE
APT 8
NAPLES, FL 34112 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: BARBARA J LEAVITT

07/08/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: LEAVITT, LESTER J
Address: 206 2ND ST
City-St-Zip: BONITA SPRINGS, FL 34134

Title: VP () Delete
Name: LEAVITT, BARBARA J
Address: 206 2ND ST
City-St-Zip: BONITA SPRINGS, FL 34134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: LEAVITT, LESTER J
Address: 8 NE 16TH PLACE, APT #2
City-St-Zip: FORT LAUDERDALE, FL 33305

Title: VP (X) Change () Addition
Name: LEAVITT, BARBARA J
Address: 2059 MONROE AVE, APT #8
City-St-Zip: NAPLES, FL 34112

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: LESTER J LEAVITT

PRES

07/08/2007

Electronic Signature of Signing Officer or Director

Date