2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 19, 2009
Secretary of State

DOCUMENT# P05000046224

Entity Name: MOLINANI INC.

Current Principal Place of Business:

20000 EAST COUNTRY CLUB DR.
805
AVENTURA, FL 33180 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 0822
HALLANDALE, FL 33008 US

New Mailing Address:

FEI Number: 20-4118298 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GALANTE, ALBERT
19195 NE 36 COURT
2705
AVENTURA, FL 33180 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:	DP	( ) Delete
Name:	GALANTE, ALBERT	
Address:	20000 EAST COUNTRY CLUB DR. APT. 805	
City-St-Zip:	AVENTURA, FL 33180 US	
Title:	DVP	( ) Delete
Name:	GALANTE, MARLYNE	
Address:	20000 EAST COUNTRY CLUB DR. APT. 805	
City-St-Zip:	AVENTURA, FL 33180 US	
Title:	DVP	( ) Delete
Name:	GALANTE, LIANA	
Address:	20000 EAST COUNTRY CLUB DR. APT. 805	
City-St-Zip:	AVENTURA, FL 33180 US	
Title:	DVP	( ) Delete
Name:	GALANTE, MOISES	
Address:	20000 EAST COUNTRY CLUB DR. APT.805	
City-St-Zip:	AVENTURA, FL 33180 US	

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:	

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: ALBERT GALANTE DP 02/19/2009

Electronic Signature of Signing Officer or Director Date