

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000048840

Entity Name: VOGLIA MATTA, CORP.

FILED
May 29, 2006
Secretary of State

Current Principal Place of Business:

16618 S.W. 68TH TERRACE
MIAMI, FL 33193

New Principal Place of Business:

1686 JEFFERSON AVENUE
MIAMI BEACH, FL 33139

Current Mailing Address:

16618 S.W. 68TH TERRACE
MIAMI, FL 33193

New Mailing Address:

1686 JEFFERSON AVENUE
MIAMI BEACH, FL 33139

FEI Number: 20-2763392

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PESANT, GUILLERMO P.A.
1313 PONCE DE LEON BLVD., SUITE 301
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

SALVATORE, SAVAREAE
1686 JEFFERSON AVE
MIAMI BEACH, FL 33139 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: SALVATORE SAVARESE

05/29/2006

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: D () Delete
Name: SAVARESE, SALVATORE
Address: 16618 S.W. 68TH TERRACE
City-St-Zip: MIAMI, FL 33193

Title: D () Delete
Name: PERROZZI, ORAZIO
Address: 16618 S.W. 68TH TERRACE
City-St-Zip: MIAMI, FL 33193

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SAVARESE, SALVATORE
Address: 1686 JEFFERSON AVE
City-St-Zip: MIAMI BEACH, FL 33139

Title: D (X) Change () Addition
Name: PERROZZI, ORAZIO
Address: 1686 JEFFERSON AVE
City-St-Zip: MIAMI BEACH, FL 33139

Title: D () Change (X) Addition
Name: PERROZZI, STEFANO
Address: 1686 JEFFERSON AVE
City-St-Zip: MIAMI BEACH, FL 33139

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: SALVATORE SAVARESE

D

05/29/2006

Electronic Signature of Signing Officer or Director

Date