2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 27, 2007 08:00 AM Secretary of State

	ANNUAL	. KEPOK I			_	Ah	27,2007	00.0
DOCUMENT # P05000052165 1. Entity Namo BAMBINO EXPORT, INC.						Ì	Secretary	of St
•	ce of Business CLUB DRIVE FL 33180	Mailing Address 3610 YACHT CLUB DRIVE #1116 AVENTURA, FL 33180			- (2011)100 (2)	2101 BIIII B271 G017 G0	19 BB/BY B11/B 11081 11010 B11/B1	11/2 24 /2 (1 1 5 d)
2. Principal P	Place of Business - No P.O. Box #	3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			04202007	Chg-P	CR2E034 (12/06))
City & State		City & State			4. FEI Number 20-2636		Applied For Not Applicable	
Zip Country		Z _I p Coun		ry	5. Certificate of Status Desired		\$8.75 Additional Fee Required	
	6. Name and Address of Current	Registered Agent			7. Name and /	Address of New F	Registered Agent	
				Name				
JACQUELINE A. SALCINES, P.A. 7711 SOUTHWEST 62ND AVENUE SUITE 201				Street Address (P.O. Box Number is Not Acceptable)				
	IAMI, FL 33143							
i				City			FL Zip Code	
8. The above	named entity submits this statement for	r the purpose of changing its	s registere	d office or register	red agent, or both	, in the State of FI		, and accept
the obligat	tions of registered agent.							
SIGNATURE	Signature, typod or printed name of registered agent	and hills if applicable (NOI	F: Regulatered	I Agent signature required	d when remelating)		DATE	
After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.0		-		.00 May Be led to Fees	PHANCES TO GE	FICERS AND DIRECTOR	20 IN 11
10. TITLE	P, D	Delete	TITLE		ADDITION3/C	HANGES TO OFF	☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP	DE GENNA, LUCIA 3610 YACHT CLUB DRIVE #111 AVENTURA,, FL 33180		NAME STREE			U000 05/10/0	00736585 7-80082-004	_
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DE GENNA, MARIO 3610 YACHT CLUB DRIVE #111 AVENTURA, FL 33180	□ Delete	1				☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	1				Change	Addition
TITLE NAME STREET ADDRESS CITY-S1-ZIP		☐ Delete					☐ Change	Addition
TITLE NAME STREET ADORESS CITY-ST-ZIP		☐ Delete				Manuel V.	☐ Chan g e	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Defete	TITLE NAME STREE				☐ Change	Addition
STREET ADDRESS	certify that the information supplied with on this report or supplemental report is reportation or the receiler or trustee emp	n this filing does not qualify h strue Ind a gcurate and that owered to execute this repor	STREE CITY-	ET ADDRESS ST-ZIP	d in Chapter 119, same logal effect 7, Florida Statutes	Florida Statutes. as if made under ; and that my nam	I further certify that the oath; that I am an office appears in Block 10	informat er or dire or Block