2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2007
Secretary of State

DOCUMENT# P06000049080

Entity Name: ITALIA SERVIZI, INC.

Current Principal Place of Business:

1691 MICHIGAN AVENUE
MIAMI BEACH, FL 33139 US

New Principal Place of Business:

Current Mailing Address:

1691 MICHIGAN AVENUE
MIAMI BEACH, FL 33139 US

New Mailing Address:

FEI Number: 13-4331709 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PIERO SALUSSOLIA CORPORATE MANAGEMENT, INC
1548 BRICKELL AVENUE
MIAMI, FL 33129 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: D ( ) Delete
Name: SCHON, NICOLA
Address: 101 20TH STREET, SUITE 2801
City-St-Zip: MIAMI BEACH, FL 33139 US

Title: PT ( ) Delete
Name: SCHON, NICOLA
Address: 101 20TH STREET, SUITE 2801
City-St-Zip: MIAMI BEACH, FL 33139 US

Title: S ( ) Delete
Name: SCHON, NICOLA
Address: 101 20TH STREET, SUITE 2801
City-St-Zip: MIAMI BEACH, FL 33139 US

Title: D ( ) Delete
Name: KARIM, MASRI
Address: 1691 MICHIGAN AVENUE
City-St-Zip: MIAMI BEACH, FL 33139

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 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: NICOLA SCHON D 03/14/2007

Electronic Signature of Signing Officer or Director Date