2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000065322

Entity Name: AMERICAN GIORO, INC

FILED Apr 20, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3124 W. NEW HAVEN AVE.
WEST MELBOURNE, FL 329043559
3124 W. NEW HAVEN AVENUE
WEST MELBOURNE, FL 32904 US

Current Mailing Address: New Mailing Address:

3124 W. NEW HAVEN AVE.
WEST MELBOURNE, FL 329043559
3124 W. NEW HAVEN AVENUE
WEST MELBOURNE, FL 32904 US

FEI Number: 20-4979914 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MANUEL DINER, P.A.

7735 NW 146 STREET

SUITE 300

MIAMI L:AKES, FL 33016 US

GIORDANO, JOSE

2153 MERLIN DRIVE

WEST MELBOURNE, FL 32904 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: JOSE GIORDANO 04/20/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: GIORDANO, PASQUALE Name: GIORDANO, PASQUALE

 Address:
 3129 10. NEW HAVEN AVE
 Address:
 2153 MERLIN DRIVE

 City-St-Zip:
 WEST MELBOURNE, FL 32904
 City-St-Zip:
 WEST MELBOURNE, FL 32904 US

Title: VP () Delete Title: VP (X) Change () Addition

Title: VP () Delete Title: VP (X) Change () Addition

Name: GIORDANO, PASCUAL J

Address: 3124 W. NEW HAVEN AVE Address: 2153 MERLIN DRIVE

City-St-Zip: WEST MELBOURNE, FL 32904 City-St-Zip: WEST MELBOURNE, FL 32904 US

Title: S () Delete Title: S (X) Change () Addition Name: GIORDANO, JOSE A Name: GIORDANO, JOSE A

Address: 3124 W. NEW HAVEN AVE Address: 2153 MERLIN DRIVE

City-St-Zip: WEST MELBOURNE, FL 32904 City-St-Zip: WEST MELBOURNE, FL 32904 US

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: JOSE A. GIORDANO S 04/20/2009