

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000144514

**Entity Name:** MANGIARBENE, INC.

**FILED**  
**Feb 24, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

4989 RINGWOOD MEADOW  
SARASOTA, FL 34235

**New Principal Place of Business:**

**Current Mailing Address:**

4989 RINGWOOD MEADOW  
SARASOTA, FL 34235

**New Mailing Address:**

**FEI Number:** 20-5996033

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

EDWARDS, SHERYL A ESQUIRE  
1515 RINGLING BOULEVARD  
SUITE 840  
SARASOTA, FL 34236 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: BIFFI, LUIGI  
Address: 4989 RINGWOOD MEADOW  
City-St-Zip: SARASOTA, FL 34235

Title: VP  
Name: GUGLIEMI, FEDERICO  
Address: 4989 RINGWOOD MEADOW  
City-St-Zip: SARASOTA, FL 34235

I hereby 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 all other like empowered.

SIGNATURE: LUIGI BIFFI

P

02/24/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date