

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000108750

Entity Name: SNIGO INC

**FILED**  
**May 27, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

18342 TREEHAVEN DR  
HUDSON, FL 34667 US

**New Principal Place of Business:**

**Current Mailing Address:**

18342 TREEHAVEN DR  
HUDSON, FL 34667 US

**New Mailing Address:**

FEI Number: 26-1401511

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CIRNIGLIARO, SALVATOR MR.  
18342 TREEHAVEN DR  
HUDSON, FL 34667 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

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: CEO  
Name: CIRNIGLIARO, SALVATOR MR  
Address: 18342 TREEHAVEN DR  
City-St-Zip: HUDSON, FL 34667 US

Title: CFO  
Name: CIRNIGLIARO, CLAUDIO MR  
Address: 18601 WHITE PINE CIRCLE  
City-St-Zip: HUDSON, FL 34667

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: SALVATOR CIRNIGLIARO

CEO

05/27/2010

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

\_\_\_\_\_  
Date