

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000125937

Entity Name: GIUMADA, INC.

FILED
Apr 14, 2008
Secretary of State

Current Principal Place of Business:

18101 COLLINS AVENUE
UNIT 4509
SUNNY ISLES BEACH, FL 33160

New Principal Place of Business:

Current Mailing Address:

18101 COLLINS AVENUE
UNIT 4509
SUNNY ISLES BEACH, FL 33160

New Mailing Address:

FEI Number: 26-1751969

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NICASTRO, MASSIMO
18101 COLLINS AVENUE
UNIT 4509
SUNNY ISLES BEACH, FL 33160 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: PD () Delete
Name: FUMAGALLI, TIZIANO
Address: 18101 COLLINS AVENUE #4509
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: VD () Delete
Name: FUMAGALLI, ELISABETTA
Address: 18101 COLLINS AVENUE #4509
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: SD () Delete
Name: FUMAGALLI, DARIO
Address: 18101 COLLINS AVENUE #4509
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: TD () Delete
Name: FUMAGALLI, GIULIA
Address: 18101 COLLINS AVENUE #4509
City-St-Zip: SUNNY ISLES BEACH, FL 33160

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 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: FUMAGALLI TIZIANO

PD

04/14/2008

Electronic Signature of Signing Officer or Director

Date