2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000102678

Entity Name: 795 ARIANNA INC.

FILED Apr 29, 2009 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New P	incipal Place of Business:
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5711 CARROLL WOOD MEADOWS DRIVE 1000 BRICKELL AVENUE, SUITE 215

TAMPA, FL 33625 MIAMI, FL 33131

Current Mailing Address: New Mailing Address:

5711 CARROLL WOOD MEADOWS DRIVE 1000 BRICKELL AVENUE, SUITE 215

TAMPA, FL 33625 MIAMI, FL 33131

FEI Number: 26-3765365 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:

CORPORATE MAINTENANCE SERVICES, LLC CORPORATE MAINTENANCE SERVICES, LLC 1000 BRICKELL AVENUE SUITE 215 1000 BRICKELL AVENUE, SUITE 215

MIAMI, FL 33131 US MIAMI, FL 33131 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: 04/29/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

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

MARTINELLI, GIULIANO MARTINELLI, GIULIANO Name: Name: Address:

5711 CARROLL WOOD MEADOWS DRIVE 1000 BRICKELL AVENUE, SUITE 215 Address:

City-St-Zip: TAMPA, FL 33625 City-St-Zip: MIAMI, FL 33131

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

Name: MODANO, ANGELINA Name: MODANO, ANGELINA

5711 CARROLL WOOD MEADOWS DRIVE Address: 1000 BRICKELL AVENUE, SUITE 215 Address:

TAMPA, FL 33625 MIAMI, FL 33131 City-St-Zip: 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: GIULIANO MARTINELLI 04/29/2009 D