2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P34219

GREGORI, XAVIER

MIAMI, FL 33166

8350 NW 56TH STREET

Name:

Address:

City-St-Zip:

Entity Name: GREGORI INTERNATIONAL, INC

FILED May 01, 2006 Secretary of State

Littly Na	IIIe. GREGO	KI INTERNATIONAL, INC.		
Current Principal Place of Business:			New Principal Place of Business:	
8350 N.W MIAMI, FL	. 56TH STREE 33166	ĒΤ		
Current Mailing Address:			New Mailing Address:	
8350 N.W MIAMI, FL	. 56TH STREE 33166	ĒΤ		
FEI Number	: 65-0263067	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of	Current Registered Agent:	Name and Address o	f New Registered Agent:
520 BRICK SUITE O-3	N, STEPHAN / KELL KEY DR 305 33131 US			
	e named entity e of Florida.	submits this statement for the	purpose of changing its registere	d office or registered agent, or both,
SIGNATU	RE:			
	Electro	nic Signature of Registered Ag	ent	Date
		93(2)(b), F.S., the corporation did nongerous Fund Contribution ().	ot receive the prior notice.	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P (GREGORI, JE RN 20 31790 : FRANCE,		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	V (PACE, CHRIS' RN 20 31790 : FRANCE,		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D (LECLERC, CH 8350 N.W. 56' MIAMI, FL		Title: Name: Address: City-St-Zip:	() Change () Addition
Title:	VP () Delete	Title:	() Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the 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.

Name:

Address:

City-St-Zip:

SIGNATURE: CHRISTOPHE LECLERC D 05/01/2006