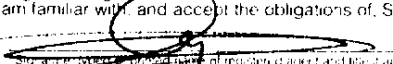
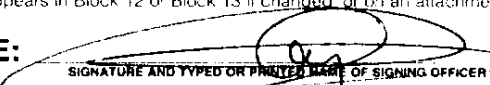
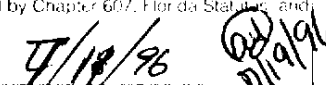


FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P94000011511 1. Corporation Name CIAO ITALIA SALOTTI, INC.			
Principal Place of Business 1751 S DIXIE HIGHWAY POMPANO BEACH FLORIDA 33060		Mailing Address 1751 S DIXIE HIGHWAY POMPANO BEACH FLORIDA 33060	
2. Principal Place of Business 21 State Apt # etc 22 City & State 23 Zip 24 Country		2a. Mailing Address 25 State Apt # etc 26 City & State 27 Zip 28 Country	
3. Date Incorporated or Qualified 02/07/94		3a. Date of Last Report 1995	
4. FEI Number 65-0466813		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes ☐ Yes ☐ No			
9. Name and Address of Current Registered Agent JENZANO, HARRY JR 3640 N FEDERAL HIGHWAY LIGHT HOUSE, FLORIDA 33064		10. Name and Address of New Registered Agent 81 Name PETER MIGLIACCIO 82 Street Address (P.O. Box Number is Not Acceptable) 1751 S DIXIE HIGHWAY 83 POMPANO BEACH FLORIDA 33060 84 City FL 85 Zip Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE:  DATE: 7/18/96			
12. OFFICERS AND DIRECTORS 12.1 TITLE PVST 12.2 NAME MIGLIACCIO, PETER 12.3 STREET ADDRESS 1751 S DIXIE HIGHWAY 12.4 CITY-STATE-ZIP POMPANO BEACH FLORIDA 33060 ☐ DELETE 12.5 TITLE D 12.6 NAME MIGLIACCIO, PETER 12.7 STREET ADDRESS 1751 S DIXIE HIGHWAY 12.8 CITY-STATE-ZIP POMPANO BEACH FLORIDA 33060 ☐ DELETE 12.9 TITLE ☐ DELETE 12.10 NAME ☐ DELETE 12.11 STREET ADDRESS ☐ DELETE 12.12 CITY-STATE-ZIP ☐ DELETE 12.13 TITLE ☐ DELETE 12.14 NAME ☐ DELETE 12.15 STREET ADDRESS ☐ DELETE 12.16 CITY-STATE-ZIP ☐ DELETE		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13.1 TITLE ☐ Change ☐ Addition 13.2 NAME ☐ Change ☐ Addition 13.3 STREET ADDRESS ☐ Change ☐ Addition 13.4 CITY-STATE-ZIP ☐ Change ☐ Addition 13.5 TITLE ☐ Change ☐ Addition 13.6 NAME ☐ Change ☐ Addition 13.7 STREET ADDRESS ☐ Change ☐ Addition 13.8 CITY-STATE-ZIP ☐ Change ☐ Addition 13.9 TITLE ☐ Change ☐ Addition 13.10 NAME ☐ Change ☐ Addition 13.11 STREET ADDRESS ☐ Change ☐ Addition 13.12 CITY-STATE-ZIP ☐ Change ☐ Addition	
14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.		000001899810 -07/19/96--01072--042 ***225.00	
SIGNATURE:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date: 7/18/96 Signature: 	

CR2E034 (12/95)