FILE NOW: FILING FEE AFTER MAY 1 IS $550.00

PROFIT CORPORATION ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
97 OCT 21 PM 3:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000041659

1. Corporation Name
IL PASTAIO INC.

REINSTATEMENT 01

Principal Place of Business	Mailing Address
11500 BISCAYNE BLVD MIAMI FL 33181	SAME

3. Date Incorporated or Qualified: 12/23/1996
3a. Date of Last Report: 10/97

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

4. FEI Number: 65-0589130 ☐ 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	10. Name and Address of New Registered Agent
LOUIS DE THOMAS 1235 NE 100 STREET MIAMI SHORES, FL 33138	81 Name: GIULIO DI STRAVOLA 82 Street Address (P.O. Box Number is Not Acceptable): 201 - 180 Street 83 84 City: MIAMI Beach FL 85 Zip Code: 33160

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: Louis de Thomas — 10/6/97
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) — DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	LOUIS DE THOMAS 1235 NE 100 STREET MIAMI SHORES FL 33138 ☒ DELETE	1.1 TITLE P/P 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	GIULIO DI STRAVOLA ☐ Change ☐ Addition 201 - 180 STREET N. MIAMI Beach FL 33160
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	GIOVANNI MARZILLI 1318 WASHINGTON AVE # 173 MIAMI Beach FL 33139 ☒ DELETE	2.1 TITLE D/S 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	MARCELLO SINONI ☒ Change ☐ Addition 11500 BISCAYNE BLVD. MIAMI FL 33181
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	☐ Change ☐ Addition 000002327060--6 -10/22/97--01081---023 ****558.75 ****558.75
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	☐ Change ☐ Addition 000002327060--6 -10/22/97--01081---024 ****200.00 ****200.00
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE: Louis de Thomas PRESIDENT 10/6/97 (305)892-1500
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #