2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000093418

Entity Name: RANGONI PALM BEACH CORPORATION

FILED Feb 26, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
224-A WC	RTH AVE				
•	ACH, FL 3348	0			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
65 N. RAYMOND AVE SUITE 240 PASADENA, CA 911033974 US			SUITE 303	650 SIERRA MADRE VILLA SUITE 303 PASADENA, CA 91107 US	
FEI Number	: 95-4510979	FEI Number Applied For (FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of (Current Registered Agen	: Name and Address o	f New Registered Agent:	
SUITE 508 MIAMI, FL The above	331560000 L	JS	he purpose of changing its registered	d office or registered agent, or both	
SIGNATU	RE:				
	Electro	nic Signature of Registered	Agent	Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ().			
OFFICER	S AND DIREC	TORS:	ADDITIONS/CHANGE	ES TO OFFICERS AND DIRECTO	
Title: Name: Address: City-St-Zip:	DP (RANGONI, NIC 275 MADISON NEW YORK, N	AVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	CAS (VAIL, JEFFRE' 275 MADISON NEW YORK, N	AVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PADDOCK, RA	TONE COURT E #106	Title: VP Name: PADDOCK, Address: 6199 CORN City-St-Zip: SAN DIEGO	ERSTONE CT E #106	
Title: Name: Address: City-St-Zip:	IBARRA, SUSA	STONE CT E 106	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	IBARRA, SUSA) Delete N STONE CT F 106	Title: Name: Address:	() Change () Addition	

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.

City-St-Zip:

SIGNATURE: SUSAN IBARRA T 02/26/2009

City-St-Zip:

SAN DIEGO, CA 92121