

FOR PROFIT CORPORATION

ATX1

2004 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #	P95000004923
1. Entity Name	
Ranieri of America Corp.	

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
6209 W Commercial Boulevard			
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
Suite 7			
City & State		City & State	
Tamarac			
Zip	Country	Zip	Country
33319			

DO NOT WRITE IN THIS SPACE

FILED
04 NOV 15 PM 4:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
REINSTATEMENT 03-04

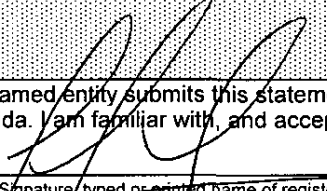
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4. FEI Number	Applied For
65-0547807	Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

7. Name and Address of Current Registered Agent

Name	
Luis A Escobar	
Street Address (P.O. Box Number is Not Acceptable)	
6209 W Commercial Boulevard	
Suite 7	
City	Zip Code
Tamarac	FL 33319

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE  **Luis A Escobar**
Signature/typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) **DATE**

January 1, May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
Trust Fund Contribution.

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	De Ranieri, Sonia
STREET ADDRESS	6209 W Commercial Blvd. #7
CITY-ST-ZIP	Tamarac, FL 33319
TITLE	VD
NAME	De Ranieri, Marcus V
STREET ADDRESS	6209 W Commercial Blvd #7
CITY-ST-ZIP	Tamarac, FL 33319
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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11.

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CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I 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 report or supplemental 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:  **President** **10/26/2004** **954-7244141**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **Date** **Daytime Phone #**

CBS FINANCIAL, CPA, PA

CERTIFIED PUBLIC ACCOUNTANTS AND CONSULTANTS

COMPREHENSIVE BUSINESS AND INDIVIDUAL FINANCIAL SOLUTIONS

October 26th, 2004

Division of Corporations
Annual Report/Reinstatement Section
P.O. Box 6327
Tallahassee, FL 32314-6327

Re: Ranieri of Amercia Corporation
Form: 2004 & 2003 Uniform Business Report
Document #: P95000004923

Dear Madam/Sir,

We have been retained by the above referenced taxpayer recently.

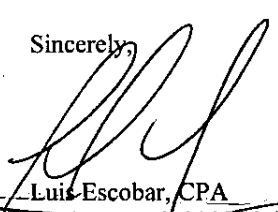
During our initial interview with the taxpayer it was discovered that **they had not received** the Florida's 2003 Uniform Business Report; therefore, they had not filed it. Please note that the taxpayer **has moved** and has a **new mailing address**.

Please find enclosed the properly completed 2003 & 2004 Uniform Business Reports and a check payable to the Florida Department of State in the amount of \$300.00.

Please abate any late filing fees or other penalties. The taxpayer did not intend to file late.

Please do not hesitate to contact our offices if you have any questions.

Sincerely,



Luis Escobar, CPA

Encl.: 2004 & 2003 Uniform Business Reports
Cc.: Nanway International Inc.