

# **2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P96000028894

Entity Name: F.C. ONE INTERNATIONAL, INC.

**FILED**  
**Aug 05, 2005**  
**Secretary of State**

**Current Principal Place of Business:**

1570 MADRUGA AVENUE  
SUITE 211  
CORAL GABLES, FL 33146

**New Principal Place of Business:**

**Current Mailing Address:**

1570 MADRUGA AVE  
STE 211  
CORAL GABLES, FL 33146

**New Mailing Address:**

FEI Number: 65-0669104

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LOPEZ-GARCIA, JORGE L  
1570 MADRUGA AVE  
SUITE 211  
CORAL GABLES, FL 33146 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: VPSD ( ) Delete  
Name: FOGLIATI, MARIA T  
Address: 1570 MADRUGA AVENUE, SUITE 211  
City-St-Zip: CORAL GABLES, FL 33146

Title: PTD ( ) Delete  
Name: CHIAPPA, ANDREA  
Address: 1570 MADRUGA AVENUE, SUITE 211  
City-St-Zip: CORAL GABLES, FL 33146

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: VPD (X) Change ( ) Addition  
Name: FOGLIATI, MARIA T  
Address: 1570 MADRUGA AVENUE, SUITE 211  
City-St-Zip: CORAL GABLES, FL 33146

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VPS ( ) Change (X) Addition  
Name: GASPERINA MONTIN, KATIA A  
Address: 1548 BRICKELL AVENUE  
City-St-Zip: MIAMI, FL 33129 US

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

SIGNATURE: ANDREA CHIAPPA

D

08/05/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date