

U. S. IFO

U.S. IFO REPORT (UBR)

DOCUMENT # P9700044085

1. Entity Name

GIOVANUCCI Enterprises, INC.

Principal Place of Business

765 JOHN RINGLING BLVD. C38
SARASOTA FL 34236

Mailing Address

1142 Hylan Blvd
STATEN ISLAND, NY
10305

2. Principal Place of Business

Suite, Apt. #, etc.

3.

c/o Peter Tesoriero, CPA
1142 Hylan Blvd.

City & State

Staten Island, NY 10305

Zip

Country

4. FEI Number

65-0765252

A6

Applied For
Not Applicable

5. Certificate of Status Desired

 \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GIOVANUCCI, ALDO
765 JOHN RINGLING BLVD.
C38
SARASOTA FL 34236

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable.

NOTE: Registered Agent Signature required when reinstating)

DATE

9. Capital Contributions
as Shown on record.

\$500.00

10. Amount of Capital Contributions
in FLORIDA to date.11. MAKE CHECK PAYABLE TO DEPT. OF STATE
SEE REVERSE SIDE FOR FEE INFORMATIONA GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION

13.

ADDRESS CHANGES ONLY

DOCUMENT #	GIOVANUCCI, ALDO 765 JOHN RINGLING BLVD. C38 SARASOTA FL 34236	STREET ADDRESS	000001765760
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14. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: Aldo Giovannucci ALDO Giovannucci

7184946612

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

Peter Tesoriero

Certified Public Accountant



1142 Hylan Boulevard, Staten Island, NY 10305

Voice (718) 816-1400 . Fax (718) 816-7300

October 26, 2006

Division of Corporations
P. O. Box 6198
Tallahassee, FL 32314-6198

Re: Giovanucci Enterprises, Inc.
TIN: 65-0765252
Form: Uniform Business Report
Year: 2006

Dear Sir or Madam:

We are the accountants for the above captioned. Please note, my client mailed this report on March 24, 2006, with a check in the amount of \$150.00, however, my client realized that this check was never cashed by the bank. Therefore, enclosed please find a copy of the report that was originally mailed March 24, 2006, and another check in the amount of \$150.00. If you have any questions, or perhaps would like to discuss this matter further, please feel free to contact me at the above mentioned number.

Sincerely,

Peter P. Tesoriero, CPA