

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000091194

1. Entity Name

ITALITEM CORP.

FILED
Apr 25, 2000 8:00 am
Secretary of State

04-25-2000 90133 037 ***150.00

Principal Place of Business

11291
11271 INTERCHANGE CIRCLE SOUTH
MIRAMAR FL 33025

Mailing Address

11291
11271 INTERCHANGE CIRCLE SOUTH
MIRAMAR FL 33025-6001

2. Principal Place of Business

11291 INTERCHANGE CIRCLE SOUTH
Suite, Apt. #, etc.

3. Mailing Address

11291 INTERCHANGE CIRCLE SOUTH
Suite, Apt. #, etc.

City & State

MIRAMAR, FL

City & State

MIRAMAR, FL

4. FEI Number

65-0821078

Applied For

Not Applicable

Zip

33025

Country

FLORIDA

Zip

33025

Country

FLORIDA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PIAZZOLI, EZIO

11271 INTERCHANGE CIRCLE SOUTH
MIRAMAR FL 33025

7. Name and Address of New Registered Agent

Name

SUSANNA BONANNO

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

11291 INTERCHANGE CIRCLE SOUTH

City

MIRAMAR

FL

Zip Code

33025

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. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DPST
PIAZZOLI, EZIO
11271 INTERCHANGE CIRCLE SOUTH
MIRAMAR FL 33025 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
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TITLE
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CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SUSANNA BONANNO
11291 INTERCHANGE CIRCLE SOUTH
MIRAMAR, FL 33025 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/19/00

Date

(954) 462-1200

Daytime Phone #

CR2E034 (9/99)