2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P97000096265

1. Entity Name
SONGUMAIO, INC.

Principal Place of Business
11036 SPRINGHILL DRIVE
SPRINGHILL, FL 34608

Mailing Address
11036 SPRINGHILL DRIVE
SPRINGHILL, FL 34608

DO NOT WRITE IN THIS SPACE

04272005   No Chg-P   CR2E034 (10/03)

4. FEI Number	Applied For
59-3508972	Not Applicable

5. Certificate of Status Desired   XXX   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MARESCA, JOSEPH G
299 PRESTON HOLLOW DRIVE
SPRING HILL, FL 34609

DO NOT WRITE IN THIS SPACE

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 _____

Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

$5.00 May Be Added to Fees

U00000348694
04/30/05-80087-007 158.75

10. OFFICERS AND DIRECTORS

TITLE	DPST
NAME	MARESCA, JOSEPH G
STREET ADDRESS	11036 SPRING HILL DR
CITY-ST-ZIP	SPRING HILL, FL 34608

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
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TITLE	
NAME	
STREET ADDRESS	
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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _Joseph G. Maresca_   Joseph G. Maresca   4/27/05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #