

0290036

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT  
CORPORATION  
ANNUAL REPORT  
1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # P98000006857**

1. Corporation Name  
**ITALICA HOLDINGS, INC.**

Principal Place of Business  
**800 EAST BROWARD BLVD. #301  
FORT LAUDERDALE FL 33301**

Mailing Address  
**800 EAST BROWARD BLVD. #301  
FORT LAUDERDALE FL 33301**

2. Principal Place of Business  
21 **2818 NW 112 AVE**  
Suite, Apt. #, etc.  
22  
City & State  
23 **MIAMI, FL**  
Zip Country  
24 **33172** 25  
2a. Mailing Address  
26 **2818 NW 112 AVE**  
Suite, Apt. #, etc.  
27  
City & State  
28 **MIAMI, FL**  
Zip Country  
29 **33172** 30

**9. Name and Address of Current Registered Agent**

**ORTEGA, ALVARO  
800 EAST BROWARD BLVD. #301  
FORT LAUDERDALE FL 33301**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE **ALVARO ORTEGA**

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

(NOTE: Registered agent signature required when requesting)

**12. OFFICERS AND DIRECTORS**

TITLE	<b>D</b>	[ ] DELETE
NAME	<b>ORTEGA, ALVARO</b>	
STREET ADDRESS	<b>800 EAST BROWARD BLVD. #301</b>	
CITY-ST-ZIP	<b>FORT LAUDERDALE FL 33301</b>	
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

**13.**

1.1 TITLE	
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

**ALVARO ORTEGA  
2818 NW 112 AVE  
MIAMI, FL 33172**

**800002798948-4  
-03/09/99-01031-024  
\*\*\*\*150.00 \*\*\*\*150.00**

**B 2/26/99 9902**

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 annual report or supplemental annual 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 thereof, or have been empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **ALVARO ORTEGA**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**FILED**

**99 FEB 26 PM 3:02**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
**01/22/1998**  
4. FEI Number  
**65-0806372**  
Applied For  
Not Applicable  
5. Certificate of Status Desired [ ] **\$8.75 Additional Fee Required**  
6. Election Campaign Financing  
Trust Fund Contribution [ ] **\$5.00 May Be Added to Fees**  
8. This corporation owes the current year Intangible  
Personal Property Tax. [ ] Yes [ ] No  
10. Name and Address of New Registered Agent

81 Name  
**ALVARO ORTEGA**  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
**2818 NW 112 AVE**  
84 City  
**MIAMI** FL 85 Zip Code  
**33172**

**Feb 10 / 99**

CR2E034 (11/98)

**Feb. 10 / 99 305-5910145**