

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000094699

Entity Name: S.G.C. MIAMI, INC.

FILED
Apr 21, 2005
Secretary of State

Current Principal Place of Business:

SHOPS AT SUNSET PL
5701 SUNSET DR. ST A-2
MIAMI, FL 33143 US

New Principal Place of Business:

Current Mailing Address:

236 MIRACLE STRIP PARKWAY SE
FT. WALTON BEACH, FL 32548 US

New Mailing Address:

FEI Number: 59-3564563

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLEET, H.BART
FLEET, SPENCER, MARTIN & KILPATRICK, PA
1104 EGLIN PARKWAY
SHALIMAR, FL 325790000 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: TREMOLINI, GUIDO
Address: 236 MIRACLE STRIP PARKWAY
City-St-Zip: FT. WALTON BEACH, FL 32548

Title: D () Delete
Name: FARONI, SIMONA
Address: 236 MIRACLE STRIP PARKWAY
City-St-Zip: FT. WALTON BEACH, FL 32548

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: SIMONA FARONI

D

04/21/2005

Electronic Signature of Signing Officer or Director

Date