


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 11, 2007 08:00 A**  
**Secretary of State**

<b>DOCUMENT # P99000013128</b>	
1. Entity Name GIANNI ENTERPRISES, INC.	

Principal Place of Business 9032 S.W. 78TH PLACE MIAMI, FL 33156	Mailing Address 9032 S.W. 78TH PLACE MIAMI, FL 33156
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DO NOT WRITE IN THIS SPACE



04092007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0904498	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent  GONZALEZ-GALLARRETA, JOSE-L 9032 S.W. 78TH PLACE MIAMI, FL 33156
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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: Jose L Gonzalez Gallarreta DATE: April 9/2007

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

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD GONZALEZ-GALLARRETA, JOSE L 9032 S.W. 78TH PLACE MIAMI, FL 33156
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD OLSZYK, CEDALIA C 9032 S.W. 78TH PLACE MIAMI, FL 33156
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04/20/07-80037-007 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Jose L Gonzalez Gallarreta 4/9/07 305-6436616

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