

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000016938

1. Entity Name

ACQUA DI PARMA, INC.

FILED 8/19/02  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

01 JUL -6 AM 9:02

Principal Place of Business  
**200 S. Biscayne Blvd.**  
**Suite 4815**  
**Miami, FL 33131**

Mailing Address  
**200 S. Biscayne Blvd.**  
**Suite 4815**  
**Miami, FL 33131**

2. Principal Place of Business  
**1548 Brickell Ave.**  
Suite, Apt. #, etc.

3. Mailing Address  
**1548 Brickell Ave.**  
Suite, Apt. #, etc.

City & State  
**Miami, FL**

City & State  
**Miami, FL**

4. FEI Number  
**65-1011829**

Applied For  
☐ Not Applicable

Zip  
**33129-1210**

Country  
**USA**

Zip  
**33129-1210**

Country  
**USA**

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

DO NOT WRITE IN THIS SPACE  
05/03/01 91129032 #150

6. Name and Address of Current Registered Agent  
**SALUSSOLIA, PIERO**  
**200 S. BISCAYNE BLVD.**  
**SUITE 4815**  
**MIAMI, FL 33131**

7. Name and Address of New Registered Agent  
Name  
**Salussolia, Piero**  
Street Address (P.O. Box Number is Not Acceptable)  
**1548 Brickell Ave.**  
City  
**Miami** **FL** **33129-1210**

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 **Piero Salussolia** **07/03/01**  
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, 2001 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		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>BORGOMANERO, GIANPAOLO</b> <b>9 ISLAND AVE UNIT 2103</b> <b>MIAMI, FL 33131</b>	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DPTS</b> <b>BORGOMANERO, GIAN PAOLO</b> <b>9 ISLAND AVE. UNIT 2103</b> <b>MIAMI, FL 33131</b>	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>AS</b> <b>SALUSSOLIA, PIERO</b> <b>200 S. BISCAYNE BLVD. SUITE 4815</b> <b>MIAMI, FL 33131</b>	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> 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: **PIERO SALUSSOLIA**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**07/03/01**

Date

205-333-1016

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**SALUSSOLIA**  
ASSOCIATES  
ATTORNEYS AT LAW

FIRST UNION FINANCIAL CENTER  
200 S. BISCAYNE BLVD. • SUITE 4815  
MIAMI, FLORIDA 33131

TELEPHONE: (305) 373-7016  
FACSIMILE: (305) 373-7017  
E-MAIL: SALUSSOLIA@AOL.COM

July 2, 2001

Via Certified Mail

FLORIDA DEPARTMENT OF STATE  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Re: Uniform Business Report Forms for PEA HOLDING, INC., GRUPPO  
GALILEO, CORP., ARIETETOUR.COM, INC., and ACQUA DI PARMA, INC.

Dear Sir/Madam:

Please be informed that the uniform business reports for the above companies were filed respectively on April 26, 2001 for PEA Holding, Inc., Gruppo Galileo, Corp. and on April 30, 2001 for Arietetour.com, Inc., and Acqua di Parma, Inc., along with the proper fees.

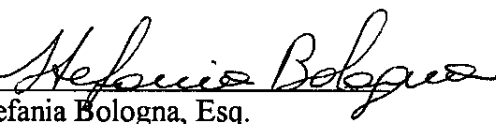
Also, please be informed that today we received a notice from the Department of State regarding the above referenced companies, a copy of which are enclosed herewith, requesting that such companies file the uniform business reports and pay the appropriate fees in the amount of \$550.00 each one. We immediately contacted the Division of Corporations, and one of your representatives informed us that we should have received a "correction notice" for each of the above companies because the FEI Numbers were missing. However, as of today, we have not received such notices. In this regard, enclosed herewith please find a new business report form for each of the above mentioned companies as amended to reflect the FEI Number.

As per the foregoing, we kindly request that the enclosed business report forms be filed, and that no late penalty fees be applied.

Your attention to this matter is greatly appreciated, and should you have any questions regarding the above, please do not hesitate to contact our office.

Very truly yours,

SALUSSOLIA & ASSOCIATES

  
Stefania Bologna, Esq.