2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000030595

Entity Name: CRIBIS CORPORATION

FILED Apr 16, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

2701 NORTH ROCKY POINT DR. STE. 1100 2701 NORTH ROCKY POINT DR. STE. 110

TAMPA, FL 33607 TAMPA, FL 33607

Current Mailing Address: New Mailing Address:

2701 NORTH ROCKY POINT DR. STE. 1100 2701 NORTH ROCKY POINT DR. STE. 110

TAMPA, FL 33607 TAMPA, FL 33607

FEI Number: 59-3588305 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CHRISTALDI, RONALD A 101 E. KENNEDY BLVD. STE. 3400 TAMPA, FL 33602 US

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Name:
 GHERARDI, CARLO
 Name:
 GHERARDI, CARLO

 Address:
 VIA LAME, 15
 Address:
 VIA FANTIN 1-3

 City-St-Zip:
 40122 BOLOGNA ITALY,
 City-St-Zip:
 BOLOGNA, IT 40131

 Name:
 FRABONI, FRABIZIO
 Name:
 FRABONI, FRABIZIO

 Address:
 VIA LAME 15
 Address:
 VIA FANTIN 1-3

 City-St-Zip:
 BOLGNA, ITALY, 40122
 City-St-Zip:
 BOLGNA, IT 40131

Title: D () Delete Title: D (X) Change () Addition

 Name:
 PRETI, MARCÓ
 Name:
 PRETI, MARCÓ

 Address:
 VIA LAME 15
 Address:
 VIA FANTIN 1-3

 City-St-Zip:
 BOLOGNA, ITALY, 40122
 City-St-Zip:
 BOLOGNA, IT 40131

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: CARLO GHERARDI D 04/16/2004