

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000103846

Entity Name: BELLAGGIO BY ANSCA, INC.

FILED
Apr 29, 2008
Secretary of State

Current Principal Place of Business:

7593 BOYNTON BEACH BLVD
SUITE 220
BOYNTON BEACH, FL 33437

New Principal Place of Business:

Current Mailing Address:

7593 BOYNTON BEACH BLVD
SUITE 220
BOYNTON BEACH, FL 33437

New Mailing Address:

FEI Number: 65-0975972

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHERMAN, MITCHELL A PA
7593 BOYNTON BEACH BLVD
SUITE 210
BOYNTON BEACH, FL 33437 US

Name and Address of New Registered Agent:

SHERMAN, MITCHELL A PA
7593 BOYNTON BEACH BLVD
SUITE 220
BOYNTON BEACH, FL 33437 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:

04/29/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: SCARDINA, CHARLES
Address: 7593 BOYNTON BEACH BLVD #220
City-St-Zip: BOYNTON BEACH, FL 33437

Title: D (X) Delete
Name: SCARDINA, ANGELO
Address: 7593 BOYNTON BEACH BLVD #220
City-St-Zip: BOYNTON BEACH, FL 33437

Title: DVP () Delete
Name: AKEL, RAMZI
Address: 7593 BOYNTON BEACH BLVD #220
City-St-Zip: BOYNTON BEACH, FL 33437

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 exemption stated 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 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: SCARDINA

DP

04/29/2008

Electronic Signature of Signing Officer or Director

Date