

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000019346

**Entity Name:** ITALPRESSE U.S.A., INC.

**Current Principal Place of Business:**

26520 MALLARD WAY  
PUNTA GORDA, FL 33950

**Current Mailing Address:**

26520 MALLARD WAY  
PUNTA GORDA, FL 33950

**FEI Number:** 65-1076723

**Certificate of Status Desired:** Yes

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

LORAH, CPA, GEOFFREY L.  
1107 W. MARION AVENUE  
SUITE 115  
PUNTA GORDA, FL 33950 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:** GEOFFREY L. LORAH, CPA

01/24/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title COO  
Name MARIOTTI, RONNY  
Address 24151 BEATRIX BLVD.  
APT. 124  
City-State-Zip: PORT CHARLOTTE FL 33954

Title TREASURER  
Name SALA, MANUELA  
Address VIA DELLE GROANE, 15  
City-State-Zip: BAGNATICA ITALY 24060

Title PRESIDENT  
Name SALA, CARLO  
Address VIA DELLE GROANE, 15  
City-State-Zip: BAGNATICA ITALY 24060

Title VP  
Name SALA, MANUELA  
Address VIA DELLE GROANE, 15  
City-State-Zip: BAGNATICA ITALY 24060

Title SECRETARY  
Name SALA, CARLO  
Address VIA DELLE GROANE, 15  
City-State-Zip: BAGNATICA ITALY 24060

*I hereby 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 all other like empowered.*

**SIGNATURE:** RONNY MARIOTTI

COO

01/24/2020

Electronic Signature of Signing Officer/Director Detail

Date