

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P12000100419

**Entity Name:** VITTORIA DREAMS INC.

**Current Principal Place of Business:**

821 JEFFERSON AVENUE  
APT. 4  
MIAMI BEACH, FL 33139

**Current Mailing Address:**

P. O. BOX 191095  
MIAMI BEACH, FL 33119 US

**FEI Number:** 99-0383416

**Certificate of Status Desired:** No

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

CECCHINI, FRANCESCO  
235 LINCOLN ROAD  
SUITE 304  
MIAMI BEACH, FL 33139 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

**Officer/Director Detail :**

Title            D  
Name            CECCHINI, FRANCESCO  
Address        235 LINCOLN ROAD  
                  SUITE 310  
City-State-Zip: MIAMI BEACH FL 33139

*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:** FRANCESCO CECCHINI

**PRESIDENT**

**02/24/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date