

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P16000060439

Entity Name: IL CARRETTO SICILIANO CORP**Current Principal Place of Business:**19242 SW 65TH. STREET
FORT LAUDERDALE, FL 33332**Current Mailing Address:**19242 SW 65TH. STREET
FORT LAUDERDALE, FL 33332**FEI Number:** 81-3378105**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BATTAGLIA, GIUSEPPE
19242 SW 65TH. STREET
FORT LAUDERDALE, FL 33332 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	P
Name	BATTAGLIA, GIUSEPPE
Address	19242 SW 65TH. STREET
City-State-Zip:	FORT LAUDERDALE FL 33332

Title	VP
Name	SPADARO, ANGELINA
Address	19242 SW 65TH. STREET
City-State-Zip:	FORT LAUDERDALE FL 33332

Title	D
Name	SPADARO, ANTONIO
Address	19242 SW 65TH. STREET
City-State-Zip:	FORT LAUDERDALE FL 33332

Title	D
Name	SPADARO, DOMINGO
Address	19242 SW 65TH. STREET
City-State-Zip:	FORT LAUDERDALE FL 33332

Title	D
Name	BATTAGLIA, MARIO
Address	19242 SW 65TH. STREET
City-State-Zip:	FORT LAUDERDALE FL 33332

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: BATTAGLIA , GIUSEPPE

P

04/12/2017

Electronic Signature of Signing Officer/Director Detail_____
Date