

**2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F11000000217

**FILED**  
**Mar 22, 2013**  
**Secretary of State**  
**CC4245348610**

**Entity Name:** INCORPORATED ITALSERVICES S.P.A.

**Current Principal Place of Business:**

VIA G. MARCONI 37/39-35010  
SN PIETRO IN GU (PADOVA)  
ITALY, XX

**Current Mailing Address:**

826 LINCOLN ROAD  
MIAMI BEACH, FL 33139

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: No**

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

TRAVIESO&ALVAREZ TAX&FINANCIAL SERVICES  
175 SW 7TH STREET  
1716  
MIAMI, FL 33130 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 C  
Name GIURUATO, MORENO  
Address VIA CHIESA R. N 25/3 36043  
CAMUSANI  
City-State-Zip: VICANTINO (VICENZA) ITALY XX

Title D  
Name MORTELARO, GIUSEPPE  
Address VIA AMATI NICOLA 6 35133  
City-State-Zip: PADOVA ITALY XX

Title D  
Name LUISON, ROBERTO  
Address VIA GARIBALDI 29 B- 35016,  
PIAZZOLA  
City-State-Zip: SUL BRENTA (PADOVA) ITALY XX

*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: LUISON , ROBERTO**

**DIRECTOR**

**03/22/2013**

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

\_\_\_\_\_  
Date