

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000002287

Entity Name: PIERANGELI GROUP, INC.

FILED  
Apr 18, 2007  
Secretary of State

**Current Principal Place of Business:**

2006 ELMWOOD AVE.  
SHARON HILL, PA 19079

**New Principal Place of Business:**

**Current Mailing Address:**

2006 ELMWOOD AVE.  
SHARON HILL, PA 19079

**New Mailing Address:**

FEI Number: 23-1745032      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CORPDIRECT AGENTS, INC.  
515 EAST PARK AVE.  
TALLAHASSEE, FL 32301      US

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

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: C      ( ) Delete  
Name: PIERANGELI, PETER F  
Address: 500 BERRY LANE  
City-St-Zip: MEDIA, PA 19063

Title: P      ( ) Delete  
Name: PIERANGELI, RINALDO J  
Address: 126 LORI LANE  
City-St-Zip: BROOMALL, PA 19008

Title: VP      ( ) Delete  
Name: MURPHY, JAMES E  
Address: 842 ALEXANDER AVE.  
City-St-Zip: DREXEL HILL, PA 19026

Title: S      ( ) Delete  
Name: PIERANGELI, IRENE  
Address: 500 BERRY LANE  
City-St-Zip: MEDIA, PA 19063

**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:

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

I hereby certify that the information supplied with this filing does not qualify for the 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: JAMES MURPHY

VP

04/18/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date