

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000109415

Entity Name: MAESTRACCI CORP.

FILED  
Jan 07, 2008  
Secretary of State

**Current Principal Place of Business:**

5525 NW 15 AVE  
STE 202  
FT LAUDERDALE, FL 33309

**New Principal Place of Business:**

**Current Mailing Address:**

5525 NW 15 AVE  
STE 202  
FT LAUDERDALE, FL 33309

**New Mailing Address:**

FEI Number: 20-1512843

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MATTHEW J. KAHN, PA  
12555 ORANGE DR  
STE 230  
DAVIE, FL 33330 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: P ( ) Delete  
Name: MAESTRACCI, GABRIEL  
Address: 5525 NW 15 AVE.  
City-St-Zip: FT LAUDERDALE, FL 33309

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

I hereby certify that the information supplied with this filing does not qualify 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: GABRIEL MAESTRACCI

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01/07/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date