

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000069632

FILED  
Apr 01, 2011  
Secretary of State

**Entity Name:** VENEZIA TWIN CENTRE, INC.

**Current Principal Place of Business:**

1200 E. VENICE AVE.  
VENICE, FL 34292

**New Principal Place of Business:**

**Current Mailing Address:**

1200 E. VENICE AVE.  
VENICE, FL 34292

**New Mailing Address:**

**FEI Number:** 65-0942102

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

VALENTI, SANTO  
1009 DEER RUN  
VENICE, FL 34293 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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: VALENTI, SANTO  
Address: 1009 DEER RUN  
City-St-Zip: VENICE, FL 34293

Title: D  
Name: VALENTI, SEBASTIANA  
Address: 1009 DEER RUN  
City-St-Zip: VENICE, FL 34293

Title: D  
Name: SAVASTA, SEBASTIAN  
Address: 1375 MAY FLOWER AVE.  
City-St-Zip: BRONX, NY 10461

Title: D  
Name: SAVASTA, PINA  
Address: 1375 MAY FLOWER AVE.  
City-St-Zip: BRONX, NY 10461

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: SANTO VALENTI

D

04/01/2011

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date