2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 11, 2006 08:00 AM
Secretary of State

DOCUMENT # S07502

1. Entity Name
TATONE PROPERTIES FLORIDA, INC.

Principal Place of Business	Mailing Address
2900 LANGSTAFF ROAD, UNIT 18 CONCORD, ONTARIO L4K 4R9 CANADA, XX	2900 LANGSTAFF ROAD UNIT 18 CONCORD, ONTARIO, CANADA, l4-k4r9 US

07062006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
98-0113567
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MASCARA, ERNEST L
CITY CENTRE 12TH FL
100 2ND AVE SOUTH
ST PETERSBURG, FL 33701

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
Due by September 6, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	TATONE, EDDIE M
STREET ADDRESS	50 FENYROSE CRESCENT
CITY-ST-ZIP	WOODBRIGE, ONT.,
TITLE	D
NAME	TATONE, PIA M
STREET ADDRESS	50 FENYROSE CRESCENT
CITY-ST-ZIP	WOODBRIGE, ONT.,
TITLE	VP
NAME	MASCARA, ERNEST L
STREET ADDRESS	P O BOX 180, N/A
CITY-ST-ZIP	ST PETERSBURG, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000569392
07/11/06-80023-022 150.00

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: E. Tatone July 5-06- 905-660-1293
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #