

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P12000047563

**FILED  
Jul 22, 2013  
Secretary of State  
CC6933690990**

**Entity Name:** ALTIERI ENTERPRISES, INC.

**Current Principal Place of Business:**

4688 SW 183RD AVENUE  
MIRAMAR, FL 33029

**Current Mailing Address:**

4688 SW 183RD AVENUE  
MIRAMAR, FL 33029 US

**FEI Number: 37-1693688**

**Certificate of Status Desired: Yes**

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

ALTIERI, CHELLIE  
4688 SW 183RD AVENUE  
MIRAMAR, FL 33029 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 P  
Name ALTIERI, CHELLIE  
Address 4688 SW 183RD AVENUE  
City-State-Zip: MIRAMAR FL 33029

Title VP  
Name ALTIERI, DONALD  
Address 4688 SW 183RD AVENUE  
City-State-Zip: MIRAMAR FL 33029

Title SEC  
Name RUIZ, JENNIFER  
Address 4688 SW 183RD AVENUE  
City-State-Zip: MIRAMAR FL 33029

Title TR  
Name ALTIERI, CHELLIE  
Address 4688 SW 183RD AVENUE  
City-State-Zip: MIRAMAR FL 33029

Title DIR  
Name ALTIERI, CHELLIE  
Address 4688 SW 183RD AVENUE  
City-State-Zip: MIRAMAR FL 33029

Title DIR  
Name ALTIERI, DONALD  
Address 4688 SW 183RD AVENUE  
City-State-Zip: MIRAMAR FL 33029

*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: CHELLIE ALTIERI**

**PRESIDENT**

**07/22/2013**

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

\_\_\_\_\_  
Date