

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 363925

**FILED**  
**Jan 05, 2011**  
**Secretary of State**

**Entity Name:** CARLUCCI REAL ESTATE INC

**Current Principal Place of Business:**

1401 N RIVERSIDE DRIVE  
STE 1503  
POMPANO BEACH, FL 33062

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 643070  
VERO BEACH, FL 32964 US

**New Mailing Address:**

**FEI Number:** 59-1292874

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FASHEK, NORMAN  
746 IRIS LANE  
VERO BEACH, FL 32963 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: TD  
Name: CARLUCCI, JOSEPH  
Address: 1401 N. RIVERSIDE DR, APT 1503  
City-St-Zip: POMPANO BEACH, FL 33062

Title: PD  
Name: CARLUCCI, AGNES  
Address: 1401 N. RIVERSIDE DR, APT 1503  
City-St-Zip: POMPANO BEACH, FL 33062

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: AGNES CARLUCCI

MRS

01/05/2011

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

\_\_\_\_\_  
Date