

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 517036

**FILED**  
**Feb 18, 2011**  
**Secretary of State**

**Entity Name:** "B" HIVE TROPHY, INC.

**Current Principal Place of Business:**

1810 N HERCULES AVE  
CLEARWATER, FL 33765

**New Principal Place of Business:**

**Current Mailing Address:**

1810 N HERCULES AVE  
CLEARWATER, FL 33765

**New Mailing Address:**

**FEI Number:** 59-1691089

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PISANI, JAMES P  
1810 N. HERCULES AVENUE  
CLEARWATER, FL 33515 US

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

PISANI, JAMES P  
1810 N. HERCULES AVENUE  
CLEARWATER, FL 33765 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:

02/18/2011

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: VD  
Name: PISANI, JAMES P  
Address: 1810 N. HERCULES AVE.  
City-St-Zip: CLEARWATER, FL 33765

Title: PD  
Name: PISANI, ROBERT G  
Address: 1810 N. HERCULES AVE.  
City-St-Zip: CLEARWATER, FL 33765

Title: T  
Name: PISANI, JOSEPH I  
Address: 1810 N HERCULES AVE  
City-St-Zip: CLEARWATER, FL 33765

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: JAMES P. PISANI

VD

02/18/2011

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

\_\_\_\_\_  
Date