## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE

## Apr 23, 2007 8:00 am Secretary of State 04-23-2007 90073 040 \*\*\*150 00 **DOCUMENT #647685** 1. Entity Name THE INFANTINO GROUP, INCORPORATED 400.0. Principal Place of Business Mailing Address 609 US 41 SOUTH P 0 BOX 2526 INVERNESS, FL 34451 INVERNESS, FL 32650 US US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 609 US 41 South Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (12/06) 04202007 Chg-P Applied For City & State 4. FEI Number City & State 59-2036489 Not Applicable NUERWESS Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent INFANTINO, THOMAS V JR Street Address (P.O. Box Number is Not Acceptable) 180 S KNOWLES WINTER PARK, FL 32789 Zip Code City FL 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 Signature, typed or printed name of registered agent and title if applicable INOTE: Registered Agent signature required when remstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. ☐ Delete ☐ Addition HILE HHE INFANTINO, THOMAS V JR NAME NAME STREET ADDRESS 180 S KNOWLES AVE, SUITE 7 STREET ADDRESS WINTER PARK, FL 32789 CITY-ST-ZIP CITY-ST-7IP Change Addition HILE HILE 🔀 Delete NAME INFANTINO, THOMAS V SR NAME 609 US 41 SOUTH STREET ADDRESS STREET ADDRESS CITY-ST-ZIP INVERNESS, FL 34451 CITY-ST-ZIP P/0 Change Addition TITLE Delete INFANTINO, FRANCES NAME NAME STREET ADDRESS 609 US 41 SOUTH STREET ADDRESS 3445o CITY-ST-ZIP INVERNESS, FL 34451 CITY-ST-ZIP U/D ☐ Change Addition TITLE THE Defete RICHARD S. INFANTINO 609 US 41 SOUTH NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST-7IP CITY - ST-7IP INVERNESS FL 34450 ☐ Change ▼ Addition TITLE ☐ Delete TITLE JOHN D. TNFANTINO 609 US 41 South NAME STREET ADDRESS STREET ADDRESS INVERNESS FL 34450 CITY-ST-ZIP CHTY-ST-ZIP 🔀 Addition ☐ Delete Change TITLE TITLE VIVIAN E INFANTINO 609 45 41 SCUTH NAME NAME STREET ADDRESS STREET ADDRESS CITY-S1-ZIP CITY-ST-ZIP INVERNESS 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 attacpretent with an address, with allyother like empowered.

FRANCES INFANTINO 4/20/07

**FILED**