## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F01000000547

ROSSINI, HULDA

NEW YORK, NY

15 WEST 72 ST., APT 31A

Name:

Address:

City-St-Zip:

Entity Name: CARLOTTA ROSSINI & ASSOCIATES, INC

FILED Apr 11, 2005 Secretary of State

Littly Name: CARLOTTA ROSSINI & ASSOCIATES, INC.						
Current Principal Place of Business:				New Principal Place of Business:		
15 WEST 72ND STREET, APT 30E NEW YORK, NY 10023						
Current Ma	ailing Addres	ss:	New Ma	New Mailing Address:		
	72ND STREET K, NY 10023	Г, АРТ 30Е				
FEI Number:	13-3374784	FEI Number Applied For ( )	FEI Number Not A	pplicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
LEXA, JOSEPH J 265 WEST 33RD STREET MIAMI BEACH, FL 33140 US				LEXA, JOSEPH J 777 ARTHUR GODFREY ROAD SUITE 320 MIAMI BEACH, FL 33140 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:				04/11/2005		
Electronic Signature of Registered Agent					Date	
Election Campaign Financing Trust Fund Contribution ( ).						
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PCDT ( ) ROSSINI, CARI 15 WEST 72NE NEW YORK, N	O ST., APT 30E	Title: Name: Address: City-St-Zi <sub>l</sub>		) Change ()Addition	
Title: Name: Address: City-St-Zip:	VSD ( ) GENTILE, ANTO 15 WEST 72ND NEW YORK, N	O ST., APT 30E	Title: Name: Address: City-St-Zi <sub>l</sub>		) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D ( ) EASTMAN, LAU 333 EAST 68TH NEW YORK, N	∃ST.	Title: Name: Address: City-St-Zi <sub>l</sub>		) Change ()Addition	
Title:	D (X	) Delete	Title:	(	) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: ANTOINETTE GENTILE VSD 04/11/2005