

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Sep 09, 2005 08:00 AM**  
**Secretary of State**

|                                               |                                                                                   |
|-----------------------------------------------|-----------------------------------------------------------------------------------|
| <b>DOCUMENT # F01000003739</b>                |  |
| 1. Entity Name<br><b>LARRY LATTANZIO INC.</b> |                                                                                   |

|                                                                              |                                                                                |
|------------------------------------------------------------------------------|--------------------------------------------------------------------------------|
| Principal Place of Business<br><b>2023 IMPERIAL CIR<br/>NAPLES, FL 34110</b> | Mailing Address<br><b>2338 IMMOKALEE RD<br/>SUITE 105<br/>NAPLES, FL 34110</b> |
|------------------------------------------------------------------------------|--------------------------------------------------------------------------------|

**DO NOT WRITE IN THIS SPACE**



09082005 No Chg-P CR25034 (10/03)

|                                    |                                                        |
|------------------------------------|--------------------------------------------------------|
| 4. FEI Number<br><b>95-4167604</b> | Applied For<br><input type="checkbox"/> Not Applicable |
|------------------------------------|--------------------------------------------------------|

|                                                           |                                       |
|-----------------------------------------------------------|---------------------------------------|
| 5. Certificate of Status Desired <input type="checkbox"/> | <b>\$8.75</b> Additional Fee Required |
|-----------------------------------------------------------|---------------------------------------|

6. Name and Address of Current Registered Agent  
**LATTANZIO, LARRY  
2023 IMPERIAL CIR  
NAPLES, FL 34110**

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IN THIS SPACE**

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.

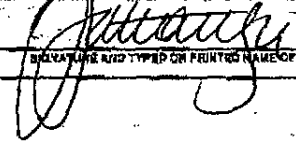
|                                                                                                      |                             |
|------------------------------------------------------------------------------------------------------|-----------------------------|
| SIGNATURE<br><small>Signature, typed or printed name of registered agent and the Proprietor.</small> | DATE<br><small>DATE</small> |
|------------------------------------------------------------------------------------------------------|-----------------------------|

|                                                                 |                                                                                                                          |                                                   |
|-----------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|
| <b>FILE NOW!!! FEE IS \$550.00<br/>Due by September 7, 2005</b> | 9. Section Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be<br>Added to Fees | <b>U00000378034<br/>09/09/05-90003-002 550.00</b> |
|-----------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|

| 10. OFFICERS AND DIRECTORS                     |                                                                            |
|------------------------------------------------|----------------------------------------------------------------------------|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>POD<br/>LATTANZIO, LARRY<br/>2023 IMPERIAL CIR<br/>NAPLES, FL 34110</b> |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>S<br/>LATTANZIO, ADRIANA<br/>2023 IMPERIAL CIR<br/>NAPLES, FL 34110</b> |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                            |

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 attachment with an address, with all other like empowered.

|                                                                                                       |                     |
|-------------------------------------------------------------------------------------------------------|---------------------|
| <b>SIGNATURE:</b>  | <b>9-6-05</b>       |
| <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>                     | <small>DATE</small> |