

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000005993

FILED
Mar 24, 2011
Secretary of State

Entity Name: JOSEPH ELETTO TRANSFER, INC.

Current Principal Place of Business:

600 WEST JOHN ST STE 200
HICKSVILLE, NY 11801

New Principal Place of Business:

600 WEST JOHN ST
SUITE 200
HICKSVILLE, NY 11801

Current Mailing Address:

600 WEST JOHN ST STE 200
HICKSVILLE, NY 11801

New Mailing Address:

600 WEST JOHN ST
SUITE 200
HICKSVILLE, NY 11801

FEI Number: 11-1989664

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ELETO, JOHN J
2100 S OCEAN LANE APT 1212
FORT LAUDERDALE, FL 33316 US

Name and Address of New Registered Agent:

O'BRIEN, THERESA
20244 MELVILLE ST
ORLANDO, FL 32833 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: THERESA O'BRIEN

03/24/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: ELETTO, JOHN
Address: 600 WEST JOHN ST STE 200
City-St-Zip: HICKSVILLE, NY 11801

Title: VD
Name: ELETTO, ROBERT
Address: 600 WEST JOHN ST STE 200
City-St-Zip: HICKSVILLE, NY 11801

Title: VD
Name: ELETTO, JOSEPH
Address: 600 WEST JOHN ST STE 200
City-St-Zip: HICKSVILLE, NY 11801

Title: S
Name: SELLARS, LINDA
Address: 600 WEST JOHN ST STE 200
City-St-Zip: HICKSVILLE, NY 11801

Title: D
Name: ELETTO, ROSE
Address: 600 WEST JOHN ST STE 200
City-St-Zip: HICKSVILLE, NY 11801

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: JOSEPH ELETTO

VD

03/24/2011

Electronic Signature of Signing Officer or Director

Date