

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F04000001058

Entity Name: COZZINI BROS., INC.

**FILED**  
**May 09, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

350 HOWARD STREET  
DES PLAINES, IL 60018

**New Principal Place of Business:**

**Current Mailing Address:**

350 HOWARD STREET  
DES PLAINES, IL 60018

**New Mailing Address:**

FEI Number: 73-1687897

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: FINNEGAN, EDWARD  
Address: 350 HOWARD STREET  
City-St-Zip: DES PLAINES, IL 60018

Title: DST  
Name: COZZINI, OSWALD  
Address: 350 HOWARD STREET  
City-St-Zip: DES PLAINES, IL 60018

Title: D CH  
Name: COZZINI, OSCAR  
Address: 350 HOWARD STREET  
City-St-Zip: DES PLAINES, IL 60018

Title: CFO  
Name: BUVEL, JOE  
Address: 350 HOWARD STREET  
City-St-Zip: DES PLAINES, IL 60018

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: JOE BUVEL

CFO

05/09/2011

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

\_\_\_\_\_  
Date