

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000001562

FILED
Jan 05, 2011
Secretary of State

Entity Name: MASTROPIETRO MANAGEMENT INC.

Current Principal Place of Business:

5039 CREEKVIEW LANE
LAKELAND, FL 33811

New Principal Place of Business:

Current Mailing Address:

5039 CREEKVIEW LANE
LAKELAND, FL 33811

New Mailing Address:

FEI Number: 52-2241055

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MASTROPIETRO, LORRAINE
5039 CREEKVIEW LANE
LAKELAND, FL 33811 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: P
Name: MASTROPIETRO, LORRAINE
Address: 5039 CREEKVIEW LANE
City-St-Zip: LAKELAND, FL 33812

Title: ST
Name: MASTROPIETRO, JOHN
Address: 5039 CREEKVIEW LANE
City-St-Zip: LAKELAND, FL 33811

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: LORRAINE MASTROPIETRO

PRES

01/05/2011

Electronic Signature of Signing Officer or Director

Date