

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

DOCUMENT # F06000003349

1. Entity Name
ASTORINO DEVELOPMENT, INC.



2007 AUG -8 AM 10: 31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
235 FORT PITT BOULEVARD
PITTSBURGH, PA 15222

Mailing Address
235 FORT PITT BOULEVARD
PITTSBURGH, PA 15222



07032007 No Chg-P CR2E034 (11/05)

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4. FEI Number
25-1874666

Applied For
Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ZEWE, JOSEPH G
1300 THIRD STREET SOUTH, SUITE 302
NAPLES, FL 34102

**DO NOT WRITE
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

Joseph G. Zewe

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 14, 2007**

9. Election Campaign Financing
Trust Fund Contribution.



\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CP
ASTORINO, LOUIS P
235 FORT PITT BOULEVARD
PITTSBURGH, PA 15222

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VCST
ZEWE, JOSEPH G
235 FORT PITT BOULEVARD
PITTSBURGH, PA 15222

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
DELLARIA, RONALD
235 FORT PITT BOULEVARD
PITTSBURGH, PA 15222

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Joseph G. Zewe

7/26/07

Date

Daytime Phone #

413-765-1700