2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000002340

Entity Name: GRAZZINI BROTHERS AND COMPANY

FILED Mar 26, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	AN INDUSTRI		New I Interput I lac	e of Business.	
Current Mailing Address:			New Mailing Addre	ess:	
1175 EAGA EAGAN, M	AN INDUSTRI IN 55121 L	AL ROAD JS			
FEI Number:	41-0286000	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
1500 SOU	ORATION SY TH PINE ISLA ON, FL 3332	ND ROAD			
	named entity of Florida.	submits this statement for the pu	rpose of changing its registe	red office or registered agent, or both,	
SIGNATUR	RE:				
	Electro	nic Signature of Registered Ager	t	Date	
Election Can	npaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	GRAZZINI, EU	NDUSTRIAL ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	GLIORI, GUID	NDUSTRIAL ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	BYRNE, JAME	NDUSTRIAL ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	GRAZZINI, ALI	NDUSTRIAL BLVD.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	GRAZZINI, GR	NDUSTRIAL ROAD	Title: Name: Address: City-St-Zin:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: JAMES BYRNE CFO 03/26/2008