

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000004045

FILED
Apr 22, 2009
Secretary of State

Entity Name: MICHAEL BIAMONTE AND ASSOCIATES, INC.

Current Principal Place of Business:

139 FULTON ST
NEW YORK, NY 10038

New Principal Place of Business:

Current Mailing Address:

611 DRUD RD. E
403
CLEARWATER, FL 33756

New Mailing Address:

FEI Number: 13-3641170 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ECKL FUTURE, INC
1700 RIDGEWAY DR
CLEARWATER, FL 33755 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CP () Delete
Name: BIAMONTE, MICHAEL
Address: 733 WEATHERSFIELD DR
City-St-Zip: DUNEDIN, FL 346987437

Title: T () Delete
Name: COPPOLI, ELIZABETH
Address: 611 DRUID RD E # 403
City-St-Zip: CLEARWATER, FL 33756

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ELIZABETH COPPOLI

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04/22/2009

Electronic Signature of Signing Officer or Director

_____ Date