2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G02627

Entity Name: POLVERINO INVESTMENTS, INC.

FILED Jan 08, 2009 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

105 SHELLIE COURT 115 SHELLIE COURT LONGWOOD, FL 32779 LONGWOOD, FL 32779

Current Mailing Address: New Mailing Address:

105 SHELLIE COURT LONGWOOD, FL 32779 115 SHELLIE COURT LONGWOOD, FL 32779

FEI Number: 59-2428613 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:

D'ALLESSANDRO, MARIE

105 SHELLIE COURT

LONGWOOD, FL 32779 US

D'ALLESSANDRO, MARIE

115 SHELLIE COURT

LONGWOOD, FL 32779 US

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: MARIE D'ALLESSANDRO 01/08/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

PD () Delete Title: PD (X) Change () Addition
D'ALLESSANDRO, MARIE,

Name: D'ALLESSANDRO, MARIE,

Address: 1415 CUELLE COURT

 Name:
 D'ALLESSANDRO, MARIE,
 Name:
 D'ALLESSANDRO, MARII

 Address:
 105 SHELLIE COURT
 Address:
 115 SHELLIE COURT

 City-St-Zip:
 LONGWOOD, FL 32779
 City-St-Zip:
 LONGWOOD, FL 32779

 Title:
 S () Delete
 Title:
 () Change () Addition

 Name:
 ARDOLINA, BARBARA,
 Name:

 Address:
 120 FOREST PARK COURT
 Address:

 City-St-Zip:
 LONGWOOD, FL 32779
 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: MARIE D'ALLESSANDRO PD 01/08/2009