


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 08, 2008 8:00 am
Secretary of State

04-08-2008 90017 031 ***150.00

DOCUMENT # J63479	
1. Entity Name PRIMO, OF S.W. FLORIDA, INC.	

Principal Place of Business % AYN KASEF CORPORATION 523 S. WASHINGTON BLVD. SARASOTA, FL 34236-7104 US	Mailing Address % AYN KASEF CORPORATION 523 S. WASHINGTON BLVD. SARASOTA, FL 34236-7104
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DO NOT WRITE IN THIS SPACE

40062234




03132008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2790311	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent	
AYN KASEF CORPORATION 1100 BEN FRANKLIN DR #202 SARASOTA, FL 34236	Attn: Sy Sherr

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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 	DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P COLUCCI, MAURIZIO 614 OWL WY SARASOTA, FL 34236
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SHERR, LINDA 1100 BEN FRANKLIN DR #202 SARASOTA, FL 34236
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST SHERR, SY 1100 BEN FRANKLIN DR #202 SARASOTA, FL 34236
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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: 	3/18/08 941 388 5577
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date Daytime Phone #