2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L92944

FILED Jan 08, 2009 Secretary of State

Entity Name: AREAL ENTERPRISES OF PINELLAS COUNTY, INC.

Current Principal Place of Business: New Principal Place of Business: 1 NO. PINELLAS AVE 4020 PARKS STREET TARPON SPRINGS, FL 34689 #303 ST.PETERBURG, FL 33709 **Current Mailing Address: New Mailing Address:** 25 HARBOR BEACH ROAD P. O. BOX 5940 MILLER PLACE, NY 11764 FEI Number: 58-1916670 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: CASTAGLIOLA, PAUL ESQ 4020 PARK ST STE 303 SAINT PETERSBURG, FL 33709 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition MARTINOS, DOROTHY Name: Name: PO BOX 5940 Address: Address: City-St-Zip: MILLER PLACE, NY 11764 City-St-Zip: Title: VΡ Title: () Delete (X) Change () Addition MARTINOS, DOROTHY Name: Name: MARTINOS, DORTHY P.O. BOX 5940 Address: P.O. BOX 5940 Address: MILLER PLACE, NY 11764 MILLER PLACE, NY 11764 City-St-Zip: Citv-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: DORTHY MARTINOS PD 01/08/2009