

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 05, 2007 8:00 am
Secretary of State

07-05-2007 90058 013 ***558.75

DOCUMENT # M74513 1. Entity Name JAMES F. PIETRO AND ASSOCIATES INC.					
Principal Place of Business 1930 NW 107TH AVENUE PEMBROKE PINES, FL 33026			Mailing Address 1930 NW 107TH AVENUE PEMBROKE PINES, FL 33026		
2. Principal Place of Business - No P.O. Box # 7777 DAVIE ROAD EXT		3. Mailing Address 7777 DAVIE ROAD EXT			
Suite, Apt. #, etc. 107B		Suite, Apt. #, etc. 107B			
City & State HOLLYWOOD, FLORIDA		City & State HOLLYWOOD, FLORIDA			
Zip 33024		Country USA		Zip 33024	
Country USA		4. FEI Number 65-0035309			
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent PIETRO, JAMES F. 1930 NW 107TH AVENUE PEMBROKE PINES, FL 33026			7. Name and Address of New Registered Agent Name ROBERT L. PIETRO Street Address (P.O. Box Number is Not Acceptable) 7777 DAVIE ROAD EXTENSION, 107B City HOLLYWOOD FL Zip Code 33024		
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 <u><i>Robert L. Pietro</i></u> ROBERT L. PIETRO JUNE 24, 2007 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$550.00 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST PIETRO, JAMES F. 1930 NW 107TH AVENUE PEMBROKE PINES, FL 33026 <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/D MICHAEL A. PIETRO 7777 DAVIE ROAD EXT, 107B HOLLYWOOD, FLORIDA 33024 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PIETRO, JAMES F. 1930 NW 107TH AVENUE PEMBROKE PINES, FL <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D JAMES F. PIETRO 7777 DAVIE ROAD EXT, 107B HOLLYWOOD, FLORIDA 33024 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/T/D ROBERT L. PIETRO 7777 DAVIE ROAD EXT, 107B HOLLYWOOD, FLORIDA 33024 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
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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 life empowered.					
SIGNATURE: <u><i>Robert L. Pietro</i></u> ROBERT L. PIETRO 6/24/07 (221)353-4557 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					