## 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000000260

FILED Mar 23, 2011 Secretary of State

Entity Name: TALLER DEL MAESTRO INC.

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

TALLER DEL MAESTRO 16134 HANNA RD. LUTZ,, FL 33549

Current Mailing Address: New Mailing Address:

PO BOX 342172 10144 ARBOR RUN DR. TAMPA, FL 33694 UNIT 157 TAMPA, FL 33647

FEI Number: 36-4499541 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ROSAS, JOSE A
5800 JUSTICIA LOOP
LAND O' LAKES, FL 34639 US
ROSAS, JOSE A
10144 ARBOR RUN DR.
UNIT 157
TAMPA, FL 33647 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: 03/23/2011

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: F

Name: ROSAS, JOSE A

Address: 10144 ARBOR RUN DR. UNIT 157

City-St-Zip: TAMPA, FL 33647

Title: PW

Name: ROSAS, BELINDA

Address: 10144 ARBOR RUN DR. UNIT 157

City-St-Zip: TAMPA, FL 33647

Title: T

Name: ROSAS, ANGEL Address: 3207 N. OLA AVE City-St-Zip: TAMPA, FL 33603

Title: 9

Name: RODRIGUEZ, GLADYS Address: 8228 GALEWOOD CIRCLE

City-St-Zip: TAMPA, FL 33615

Title: AP

Name: ROSAS, SANTA Address: 3207 N. OLA AVE City-St-Zip: TAMPA, FL 33603

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOSE ROSAS P 03/23/2011