

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000001924

FILED
Apr 28, 2008
Secretary of State

Entity Name: MICHELANGELO GRAPHIC DISPLAY, INC.

Current Principal Place of Business:

6408 WEST LINEBAUGH AVE
101-102
TAMPA, FL 33625

New Principal Place of Business:

Current Mailing Address:

6408 WEST LINEBAUGH AVE
101-102
TAMPA, FL 33625

New Mailing Address:

FEI Number: 59-3616430

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PORAT, RON
7505 ALLOWAY STREET
TAMPA, FL 33625 US

Name and Address of New Registered Agent:

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:

Title: D () Delete
Name: CARLETTI, OTTAVIO
Address: 5716 PINEY LANE DR.
City-St-Zip: TAMPA, FL 33625

Title: VT () Delete
Name: CIFUENTES, CLAUDIA
Address: 5716 PINEY LANE DR.
City-St-Zip: TAMPA, FL 33625

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: CLAUDIA CIFUENTES

VT

04/28/2008

Electronic Signature of Signing Officer or Director

Date