2005 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

with all other like

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

changed, or on an attachment with

SIGNATURE:

FILED Mar 17, 2005 08:00 AM Secretary of State DOCUMENT # P01000001719 1. Entity Name GREGORIO INVESTMENTS CORPORATION Principal Place of Business - Mailing Address 540 SUMMERHILL DRIVE N.E. ST. PETERSBURG FL 33716 540 SUMMERHILL DRIVE N.E. ST. PETERSBURG FL 33716 2. Principal Place of Business 3. Mailing Address Suite, Apt, #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/04) Applied For City & State City & State 4. FEI Number 59-3689990 Not Applicable Zip Country Zio Country \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name TENA, LEONCIO B 540 SUMMERHILL DRIVE N.E. Street Address (P.O. Box Number is Not Acceptable) ST. PETERSBURG FL 33716 Zip Code 3. 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. Change Addition TITLE Delete TITLE NAME GREGORIO-TENA, ROSITA NAME 540 SUMMERHILL DRIVE N.E. STREET ADDRESS STREET ADDRESS ST. PETERSBURG FL 33716 CITY-ST-ZIP CHY-ST-7P ST TITLE Delete THEF Сhалge Addition TENA, LEONCIO B NAME NAME STREET ADDRESS 540 SUMMERHILL DRIVE N.E. STREET ADDRESS ST. PETERSBURG FL 33716 CITY-ST ZIP CITY-ST-ZIP VΡ TITLE Delete 1) f) F Change ☐ Addition NAME TENA, LEONARD B STREET ADDRESS 540 SUMMERHILL DRIVE N.E. STREET ADDRESS CITY-ST-71P ST. PETERSBURG FL 33716 CCTY-ST-7IP TITLE teut ☐ Defete ☐ Change Addition TENA-LIFSET, ROWENA G NAME NAME STREET ADDRESS 540 SUMMERHILL DRIVE N.E. STREET ADDRESS CITY-ST-ZIP ST. PETERSBURG FL 33716 CITY-ST-ZIP TITLE Delete Change Addition HILE TENA-TRELLO, ROSELLE G NAME NAME 540 SUMMERHILL DRIVE N.E. STREET ADDRESS STREET ADDRESS ST. PETERSBURG FL 33716 CITY-ST-ZIP CITY-ST ZIP TITLE Delete TITLE ☐ Change Addition TENA, LAWRENCE B NAME NAME 540 SUMMERHILL DRIVE N.E. STREET ADDRESS STREET ADORESS ST. PETERSBURG FL 33716 CITY, ST-7/P CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 of the certific excelver or trustee empowered to execute his 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.