
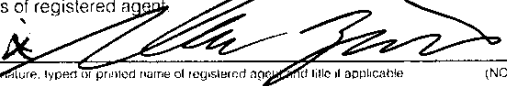
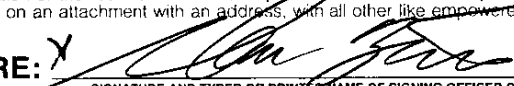


2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 20, 2006 8:00 am
Secretary of State

02-20-2006 90054 017 ***150.00

DOCUMENT # P01000053353 1. Entity Name RIZZOTTO INCORPORATED					
Principal Place of Business 7155 SEMINOLE PLAZA SEMINOLE FL 33772			Mailing Address 7155 SEMINOLE PLAZA SEMINOLE FL 33772		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-3729628	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
RIZZOTTO, MARK J 7195 SEMINOLE PLAZA SEMINOLE FL 33702				Name Street Address (P.O. Box Number is Not Acceptable) 7155 Seminole Blvd. City Seminole FL 33772	
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  <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>				DATE 2-6-06	
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee Will Be \$550.00 Make Check Payable to Florida Department of State				9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. <input type="checkbox"/> Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE S	RIZZOTTO, MARK J <input type="checkbox"/> Delete 12049 80TH AVE NORTH SEMINOLE FL 33772		TITLE Pres, V.P. Secretary-Director	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME RIZZOTTO, MARK J			NAME		
STREET ADDRESS 12049 80TH AVE NORTH			STREET ADDRESS		
CITY-ST-ZIP SEMINOLE FL 33772			CITY-ST-ZIP		
TITLE DT	RIZZOTTO, MARIA <input type="checkbox"/> Delete 12049 80TH AVE NORTH SEMINOLE FL 33772		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME RIZZOTTO, MARIA			NAME		
STREET ADDRESS 12049 80TH AVE NORTH			STREET ADDRESS		
CITY-ST-ZIP SEMINOLE FL 33772			CITY-ST-ZIP		
TITLE			TITLE		
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NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 like empowered.					
SIGNATURE:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date 2-6-06 Daytime Phone # 392-8852		