## 2010 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000006845

Entity Name: DINO MERIGHI, INC.

Apr 18, 2010 Secretary of State

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

400 N.RIVERSIDE DR.

307

POMPANO BEACH, FL 33062

**New Mailing Address: Current Mailing Address:** 

400 N.RIVERSIDE DR.

POMPANO BEACH, FL 33062

FEI Number: 01-0590916 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

MERIGHI, DINO 400 N. RIVERSIDE DR.

POMPANO BEACH, FL 33062 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: Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title:

MERIGHI, DINO Name: 400 N. RIVERSIDE DR. Address: City-St-Zip: POMPANO BEACH, FL 33062

Title:

MERIGHI, DINO Name: 400 N.RIVERSIDE DR. Address: POMPANO BEACH, FL 33062 City-St-Zip:

Title:

MERIGHI, DINO Name: 400 N RIVERSIDE DR Address: City-St-Zip: POMPANO BEACH, FL 33062

Title:

MERIGHI, DINO Name: Address: 400 N.RIVERSIDE DR. City-St-Zip: POMPANO BEACH, FL 33062

Title:

Name: MERIGHI, DINO 400 N.RIVERSIDE DR. Address: POMPANO BEACH, FL 33062 City-St-Zip:

Title:

Name: MERIGHI, DINO 400 N.RIVERSIDE DR. Address: City-St-Zip: POMPANO BEACH, FL 33062

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

SIGNATURE: DINO MERIGHI **PRES** 04/18/2010