

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000034998

FILED
Apr 18, 2008
Secretary of State

Entity Name: BASILOTTO INTERNATIONAL, INC.

Current Principal Place of Business:

6326 PONCE DE LEON BLVD.
NORTH PORT, FL 34286

New Principal Place of Business:

6326 PONCE DE LEON BLVD.
NORTH PORT, FL 34291

Current Mailing Address:

6326 PONCE DE LEON BLVD.
NORTH PORT, FL 34286

New Mailing Address:

6326 PONCE DE LEON BLVD.
NORTH PORT, FL 34291

FEI Number: 03-0416942

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALL FLORIDA FIRM, INC.
465 S VOLUSIA AV, SUITE C
ORANGE CITY, FL 32763 US

Name and Address of New Registered Agent:

BASILOTTO, MICHELLE L PRES.
6326 PONCE DE LEON BLVD
NORTH PORT, FL 34291 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: MICHELLE BASILOTTO

04/18/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BASILOTTO, MICHELLE L PRES.
Address: 6326 PONCE DE LEON BLVD.
City-St-Zip: NORTH PORT, FL 34286 US

Title: SECR () Delete
Name: BASILOTTO, MICHAEL S SECR
Address: 6326 PONCE DE LEON BLVD
City-St-Zip: NORTH PORT, FL 34286 US

Title: TRES (X) Delete
Name: DWORSKY, JOSEPH A
Address: 6326 PONCE DE LEON BLVD
City-St-Zip: NORTH PORT, FL 34286 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BASILOTTO, MICHELLE L PRES.
Address: 6326 PONCE DE LEON BLVD.
City-St-Zip: NORTH PORT, FL 34291 US

Title: SECR (X) Change () Addition
Name: BASILOTTO, MICHAEL S SECR
Address: 6326 PONCE DE LEON BLVD
City-St-Zip: NORTH PORT, FL 34291 US

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: MICHELLE L BASILOTTO

PRES

04/18/2008

Electronic Signature of Signing Officer or Director

Date