

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000045545

**FILED**  
**Jan 17, 2011**  
**Secretary of State**

**Entity Name:** MICIOTTA WHOLESALE MEATS, INC.

**Current Principal Place of Business:**

951 SW 4TH AVE.  
BOCA RATON, FL 334325803

**New Principal Place of Business:**

1919 NW 19TH STREET  
402  
FORT LAUDERDALE, FL 33430

**Current Mailing Address:**

951 SW 4TH AVE.  
BOCA RATON, FL 334325803

**New Mailing Address:**

**FEI Number:** 04-3651954      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

BLAKESBERG, JON D  
951 SW 4TH AVE.  
BOCA RATON, FL 334325803 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: MICIOTTA, GLEN S  
Address: 10071 NW 7TH STREET  
City-St-Zip: PLANTATION, FL 33324

Title: VP  
Name: MICIOTTA, FRANK A  
Address: 951 SW 4TH AVE.  
City-St-Zip: BOCA RATON, FL 334325803

Title: S  
Name: FISHMAN, KEITH  
Address: 6660 NW 81ST TERRACE  
City-St-Zip: PARKLAND, FL 33076

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: GLEN MICIOTTA

P

01/17/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date