

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000142873

FILED
Jan 17, 2008
Secretary of State

Entity Name: MOSTO GENERAL CONTRACTOR, INC.

Current Principal Place of Business:

3325 AIRPORT PULLING RD
S-7
NAPLES, FL 34105

New Principal Place of Business:

19664 VILLA ROSA LOOP
FT MYERS, FL 33967

Current Mailing Address:

3325 AIRPORT PULLING RD
S-7
NAPLES, FL 34105

New Mailing Address:

19664 VILLA ROSA LOOP
FT MYERS, FL 33967

FEI Number: 20-0450673

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOSTO, OSCAR
19664 VILLA ROSA LOOP
FORT MYERS, FL 33967 US

Name and Address of New Registered Agent:

ALL FLORIDA FIRM INC
813 DELTONA BLVD
ST A
DELTONA, FL 32725 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: VICTOR M ERWIN

01/17/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MOSTO, OSCAR
Address: 19664 VILLA ROSA LOOP
City-St-Zip: FORT MYERS, FL 33967

Title: V () Delete
Name: MOSTO, EDUARDO
Address: 19664 VILLA ROSA LOOP
City-St-Zip: FORT MYERS, FL 33967

Title: T () Delete
Name: MOSTO, KAREN
Address: 3027 HORIZON LN 2402
City-St-Zip: NAPLES, FL 34109

Title: S (X) Delete
Name: MESSARINA, GINO
Address: 2307 BRUNER LANE #3
City-St-Zip: FORT MYERS, FL 33912

Title: OFF (X) Delete
Name: NOBOA, CARLA V
Address: 379S COSTA MAYA WAY
City-St-Zip: ESTERO, FL 33928

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: OSCAR MOSTO

P

01/17/2008

Electronic Signature of Signing Officer or Director

Date