## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000097159

Entity Name: MANZANO BROTHERS, INC

**FILED** May 21, 2009 Secretary of State

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

40 11TH STREET 207 11TH STREET

SANTA ROSA BEACH, FL 32459 US #98

SHALIMAR, FL 32579

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

40 11TH STREET 207 11TH STREET

SANTA ROSA BEACH, FL 32459 # 98 US SHALIMAR, FL 32579

FEI Number: 20-1298577 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:

MANZANO, MARIO MANZANO, MARIO 40 11TH STREET 207 11TH STREET

SANTA ROSA BEACH, FL 32459 #98 US SHALIMAR, FL 32579 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: MARIO MANZANO 05/21/2009

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title:

Title: (X) Change ( ) Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete MANZANO, MARIO MANZANO, MARIO Name: Name: 40 11STREET #98 207 11TH STREET Address: Address:

City-St-Zip: SHALIMAR, FL 32579 City-St-Zip: SANTA ROSA BEACH, FL 32459 US

VΡ Title: VΡ Title: () Delete (X) Change ( ) Addition

Name: MANZANO, JOSE Name: MANZANO, JOSE 40 11TH STREET #98 207 11TH STREET Address: Address:

SHALIMAR, FL 32579 SANTA ROSA BEACH, FL 32459 US City-St-Zip: City-St-Zip:

( ) Delete Title: Title: (X) Change ( ) Addition MANZANO, JOSE MISAEL MANZANO, JOSE MISAEL Name: Name:

40 11TH STREET #98 207 11TH STREET Address: Address:

City-St-Zip: SHALIMAR, FL 32579 US City-St-Zip: SANTA ROSA BEACH, FL 32459 US

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.

Ρ SIGNATURE: MARIO MANZANO 05/21/2009