

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2005 8:00 am
Secretary of State

04-22-2005 90260 038 ***150.00

DOCUMENT # P04000118887 1. Entity Name VENTERRA DEVELOPMENTS, INC.					
Principal Place of Business 4724 TAMWORTH DRIVE PALM HARBOR, FL 34685			Mailing Address 4724 TAMWORTH DRIVE PALM HARBOR, FL 34685		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.		20040763 	
City & State		City & State		4. FEI Number 52-2445667	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent WARD, R. CARLTON 1253 PARK STREET CLEARWATER, FL 34616 CLEARWATER				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reconstituting) _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT FANSTO PALOMBO 185 ROSSMULL CARR. WOODBLEDGE, ONTARIO L4L 1E2 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY ROY NICOLOUCCI 46 CROFTERS RD. WOODBLEDGE, ONTARIO L4L 1E2 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER RETORINO TATONK 50 FENYKOSK CARR. WOODBLEDGE, ONTARIO L4L 1E2 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V.P. KABIAN BERNARDI 4724 TAMWORTH DR. PALM HARBOR, FLORIDA 34685 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>FANSTO PALOMBO</u> APRIL 17/05 905 851-5000 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

ATTACHMENT 20040763

Division of Corporations**Annual Report**

The following is a review of the changes you are making for the filing of your Annual Report. Please verify the information for accuracy before submitting the document. Should you have additional corrections, use your browser 'BACK' button, make the necessary changes and use the 'CONTINUE' button again.

Document Number	P04000118887
Business Entity Name	VENTERRA DEVELOPMENTS, INC.
FEI Number	522445664
FEI Number Status	Current
Certificate of Status Desired	No
Election Campaign Financing Trust Fund Contribution	No

Principal Place of Business

Address	4724 TAMWORTH DRIVE
Suite, Apt. #, etc.	
City, State	PALM HARBOR, FL
Zip Code & Country	34685

Mailing Address

Address	4724 TAMWORTH DRIVE
Suite, Apt. #, etc.	
City, State	PALM HARBOR, FL
Zip Code & Country	34685

Name And Address of Registered Agent

Name (Last, First, Middle, Title)	WARD, R. CARLTON
Address	1253 PARK STREET
Suite, Apt. #, etc.	
City, State	CLEARWATER, FL
Zip Code & Country	34616 US

Registered Agent Signature**Officer/Director Name And Address**

Title	P/D
Name (Last, First, Middle, Title)	PALOMBO, FAUSTO
Street Address	105 ROSSMULL CRES.
City, State	WOODBIDGE, ONTARIO, CANADA, **
Zip Code & Country	L4L 7E2 **
Title	S/D

20040763
#P040001888

Name (Last, First, Middle, Title) NICOLUCCI, ROY
Street Address 46 CROFTERS RD.
City, State WOODBRIDGE, ONTARIO, CANADA, **
Zip Code & Country L4L 7C7 **
Title T/D

Name (Last, First, Middle, Title) TATONE, ETTORINO
Street Address 50 FENYROSE CRES.
City, State WOODBRIDGE, ONTARIO, CANADA, **
Zip Code & Country L4L 7B3 **
Title V

Name (Last, First, Middle, Title) BIANCHI, FABIAN
Street Address 4724 TAMWORTH DR.
City, State PALM HARBOR, FL
Zip Code & Country 34685 US
Title P/D

Officer/Director Signature FAUSTO PALOMBO

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