## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000067567

Entity Name: 77 MANAGEMENT GROUP, INC.

FILED Jun 01, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Frincipal Flace Of Business.	New Fillicipal Flace Of Dusiliess.

2001 WELLFLEET CT. 13802 LANDSTAR BLVD.

UNIT D **UNIT 105** 

ORLANDO, FL 32837 ORLANDO, FL 32824 US

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

13802 LANDSTAR BLVD. 2001 WELLFLEET CT.

UNIT D **UNIT 105** ORLANDO, FL 32837

ORLANDO, FL 32824 US

FEI Number: 20-2919550 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

BARBERA, ROCIO C 6388 CASTELVEN DR. 103 ORLANDO, FL 32835 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:

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:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change ( ) Addition BARBERA, ROCIO C Name: Name: BARBERA, ROCIO C

6388 CASTELVEN DR. # 103 6388 CASTELVEN DR. # 103 Address: Address: City-St-Zip: ORLANDO, FL 32835 City-St-Zip: ORLANDO, FL 32835 US

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

Name: BARBERA, ROCIO C Name: 2001 WELLFLEET CT UNIT D Address: Address: ORLANDO, FL 32835 City-St-Zip: 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.

Ρ SIGNATURE: ROCIO BARBERA 06/01/2009