## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000072616

Entity Name: EQUINE INTACT 24-7 INC.

FILED May 09, 2009 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

2210 N.W. 68 TH AVE. C/O PEPPER 1515 UNIVERSITY DRIVE

**HOUSE** 114

MARGATE, FL 33063 US CORAL SPRINGS, FL 33071 US

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

2210 N.W. 68 TH AVE. C/O PEPPER 1515 UNIVERSITY DRIVE HOUSE

CORAL SPRINGS, FL 33071 MARGATE, FL 33063 US

FEI Number: 20-2857694 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:

SCIVOLETTO, JOSEPH C SR. PEPPER, GERALD M 2210 N.W. 68 TH AVE. 1515 UNIVERSITY DRIVE HOUSE

MARGATE, FL 33063 US CORAL SPRINGS, FL 33071 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: GERALD M PEPPER 05/09/2009

> 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:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

SCIVOLETTO, JOSEPH C SR. VITO, FLORIO Name: Name:

2210 N. W. 68 TH AVE. 8895 NW 2ND STREET Address: Address: City-St-Zip: MARGATE, FL 33063 US City-St-Zip: CORAL SPRINGS, FL 33071 US

Title: VΡ (X) Delete Title: () Change () Addition Name: FLORIO, VITO Name:

8895 N.W. 2ND ST. Address: Address: CORAL SPRINGS, FL 33071 US City-St-Zip: City-St-Zip:

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

SCIVOLETTO, JOSEPH C SR., Name: Name: 2210 N. W. 68 TH AVE. Address: Address City-St-Zip: MARGATE, FL 33063 US 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: VITO FLORIO P/D 05/09/2009