2008 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P05000125441

1. Entity Name

E & É BARLETTA INC.



FILED
Jul 11, 2008 08:00 AM
Secretary of State

Principal Place of Business

Mailing Address

20125 BUTTERMERE CT ESTERO, FL 33928 20125 BUTTERMERE CT ESTERO, FL 33928



07072008

No Chg-P

CR2E034 (11/05)

4. FEI Number 20-3286228

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MAROTTA, EUGENE C 20125 BUTTERMERE CT ESTERO, FL 33928

DO NOT WRITE IN THIS SPACE

8	I. 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.	US000000	" オモウで

U00000954166 07/11/08-80002-007 150.00

SIGNATURE.

Signature, typed or printed name of registered agent and little it applicable

(NOTE, Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00 Due by September 12, 2008 Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10.	OFFICERS AND DIRECTORS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES MAROTTA, EUGENE C 20125 BUTTERMERE CT ESTERO, FL 33928
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MAROTTA, ELIZABETH J 20125 BUTTERMERE CT ESTERO, FL 33928
TITLE NAME STREET AUDRESS CHY-ST-ZIP	TREA MAROTTA, EUGENE C 20125 BUTTERMERE CT ESTERO, FL 33928
TITLE NAME STREET ADDRESS CITY-S1- ZIP	SECR MAROTTA, ELIZABETH J 20125 BUTTERMERE CT ESTERO, FL 33928
TITLE NAME STREET ADDRESS CHTY-ST-ZIP	
NAME STREET ADDRESS CITY-ST-ZIP	certify that the information supplied with this filling does not qualify for the ex

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

MOLINE . I WAN HE DE SIGNING DEED

EVEENE C. MARLITA

7/9/08

239-498-1095

Date

Daytima Phone #