

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000002471

**FILED**  
**Feb 16, 2010**  
**Secretary of State**

**Entity Name:** FLORIDA STATE RESTORATION SERVICES, INC.

**Current Principal Place of Business:**

4585 N. DIXIE HIGHWAY  
POMPANO BEACH, FL 33064

**New Principal Place of Business:**

**Current Mailing Address:**

4585 N. DIXIE HIGHWAY  
POMPANO BEACH, FL 33064

**New Mailing Address:**

**FEI Number:** 55-0913108

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BENSON MUCCI & WEISS P.L.  
5561 NORTH UNIVERSITY DRIVE  
102  
CORAL SPRINGS, FL 33067 US

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

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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** P/D  
**Name:** PETILLI, EUGENE  
**Address:** 4585 N. DIXIE HIGHWAY  
**City-St-Zip:** POMPANO BEACH, FL 33064

**Title:** VP/T  
**Name:** BANEY, MICHAEL  
**Address:** 4585 N. DIXIE HIGHWAY  
**City-St-Zip:** POMPANO BEACH, FL 33064

**Title:** S  
**Name:** PETILLI, EUGENE  
**Address:** 4585 N. DIXIE HIGHWAY  
**City-St-Zip:** POMPANO BEACH, FL 33064

I hereby 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 all other like empowered.

**SIGNATURE:** EUGENE PETILLI

CEO

02/16/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date