2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000013198

CABRERA, ROSE

3356 W 73 TERR

HIALEAH GARDEN, FL 33018

Name:

Address:

City-St-Zip:

Entity Name: PEZZOTTI EXPRESS SERVICES INC.

FILED Feb 14, 2009 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
3356 W 73	-					
	BARDEN, FL	_ 33018				
Current Ma	ailing Addr	ess:	New Maili	ing Address:		
3356 W 73 HIALEAH G	TERR BARDEN, FL	_ 33018				
FEI Number:	20-8348355	FEI Number Applied F	For () FEI Number Not App	licable () Certificate of Status Desired ()		
Name and	Address of	Current Registered A	Agent: Name and	Address of New Registered Agent:		
3356 W 73 HIALEAH G	SARDEN, FL	_ 33018 US	nt for the purpose of changing i	its registered office or registered agent, or both		
in the State SIGNATUR						
SIGNATOR		onic Signature of Regis	stered Agent	Date		
Election Cam		ing Trust Fund Contributio	-			
OFFICERS	AND DIRE	CTORS:	ADDITION	NS/CHANGES TO OFFICERS AND DIRECTO		
Title: Name: Address: City-St-Zip:	CABRERA, R 3356 W 73 T		Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	CABRERA, R 3356 W 73 T		Title: Name: Address: City-St-Zip:	DVS (X) Change () Addition CABRERA, ROSE 3356 W 73 TERR HIALEAH GARDEN, FL 33018		
Title: Name: Address: City-St-Zip:	CHAVARRIA, 3356 W 73 T		Title: Name: Address: City-St-Zip:	() Change () Addition		
Title:	s	(X) Delete	Title:	() Change () Addition		

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.

Name:

Address:

City-St-Zip:

SIGNATURE: ROBERTO A CABRERA P 02/14/2009