2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000018404

Entity Name: STUCCO RX INC.

Address:

City-St-Zip:

16 FELICIA CT

PALM COAST, FL 32137

FILED Sep 18, 2009 Secretary of State

Current P	rincipal Plac	e of Business:	New Principal Place	New Principal Place of Business:	
1328 SERI ORLANDO	SSA CT), FL 32818	US			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
1328 SERI ORLANDO	SSA CT), FL 32818	US			
FEI Number:	: 13-4354058	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
1328 SERI	, ANTHONY SSA CT), FL 32809	US			
	named entity e of Florida.	submits this statement for the	purpose of changing its registered	d office or registered agent, or both,	
SIGNATU	RE:				
	Electro	onic Signature of Registered Ag	ent	Date	
		93(2)(b), F.S., the corporation did nangering trust Fund Contribution ().	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P (IASIMONE, AI 1328 SERISS ORLANDO, FI	A CT	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP (IASIMONE, BI 16 FELICIA C PALM COAST	Т	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	S (IASIMONE. B) Delete RITNEY	Title: Name:	() 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.

Address:

City-St-Zip:

SIGNATURE: ANTHONY IASIMONE P 09/18/2009