

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000098282

Entity Name: CARIOTI, INC.

**FILED**  
**Feb 17, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

6499 NEW INDEPENDENCE PARKWAY  
WINTER GARDEN, FL 34787

**New Principal Place of Business:**

1650 SAND LAKE ROAD, 107  
ORLANDO, FL 32809

**Current Mailing Address:**

8306 DIAMOND COVE CIRCLE  
ORLANDO, FL 32836

**New Mailing Address:**

1650 SAND LAKE ROAD, 107  
ORLANDO, FL 32809

FEI Number: 26-1077303

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CARIOTI, ALBERT  
6499 NEW INDEPENDENCE PARKWAY  
WINTER GARDEN, FL 34787 US

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

CARIOTI, ALBERT  
1650 SAND LAKE ROAD, 107  
ORLANDO, FL 32809 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:

02/17/2011

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: CARIOTI, ALBERT  
Address: 6499 NEW INDEPENDENCE PARKWAY  
City-St-Zip: WINTER GARDEN, FL 34787

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: ALBERT CARIOTI

DIR

02/17/2011

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

\_\_\_\_\_  
Date