## 2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

## May 09, 2008 8:00 am Secretary of State DOCUMENT # P07000108897 Entity Name 05-09-2008 90011 037 \*\*\*150.00 STEVEN V. BONAIUTO HANDYMAN, INC. Principal Place of Business Mailing Address 920 BURN DRIVE 920 BURN DRIVE PALM BAY FL 32905 PALM BAY FL 32905 2. Principal Place of Business - No P.C. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/07) City & State City & State Applied For 1-3837077 Not Applicable Ζıp Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BONAIUTO, STEVEN V Street Address (P.O. Box Number is Not Acceptable) 920 BURN DRIVE PALM BAY FL 32905 Zip Code 8. 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 ag 4/15/2008 (NOTE Registered Accret signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2008 Fee Will Be \$550.00 Trust Fund Centribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 **PVST** Delete TITLE Change ☐ Addition BONAIUTO, STEVEN V MAME STREET ADDRESS 920 BURN DRIVE STREET ADDRESS CITY-ST-7/2 PALM BAY FL 32905 CITY-ST-ZIP TITLE ☐ De⊧ete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY ST - 71P TITLE Delete THE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete Change ☐ Addition MAME STREET ADDRESS STREET ADDRESS OITY-ST-ZIP CITY - ST- 7IP TITLE ☐ Delete ☐ Change TITLE Addition NAME STREET ADDRESS STREET ADDRESS CDY-SI-ZIP CITY-ST-ZIE TITLE Delete Change Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

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.

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes, I further certify that the information

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

President 4/15/2008 Steven V. Bongium

FILED