2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jul 14, 2009
Secretary of State

DOCUMENT# P07000134850

Entity Name: RIATTO MANAGEMENT CO.

Current Principal Place of Business:

4334 SW 9TH AVE.
CAPE CORAL, FL USA 33

New Principal Place of Business:

Current Mailing Address:

4334 SW 9TH AVE.
CAPE CORAL, FL USA 33

New Mailing Address:

FEI Number: 90-0495269 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ALMAZAN, CARMELITA B SR
4334 SW 9TH AVE.
CAPE CORAL, FL 33914 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

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: AUSTRIACO, CAROLINA B SR.
Address: 4334 SW 9TH AVE.
City-St-Zip: CAPE CORAL, FL 33914 US

Title: VP ( ) Delete
Name: CARMELITA, ALMAZAN
Address: 4334 SW 9TH AVE.
City-St-Zip: CAPE CORAL, FL 33914

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: SWEZY, WILLIAM B SR.
Address: 1109 SE 40TH ST.
City-St-Zip: CAPE CORAL, FL 33904 US

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: CARMELITA B. ALMAZAN VP 07/14/2009

Electronic Signature of Signing Officer or Director Date