

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000032417

Entity Name: CARLETTO SERVICES, INC.

FILED
Mar 12, 2009
Secretary of State

Current Principal Place of Business:

4937 LEONARD BLVD
LEHIGH ACRES, FL 33971

New Principal Place of Business:

4937 LEONARD BLVD S
LEHIGH ACRES, FL 33973

Current Mailing Address:

4937 LEONARD BLVD
LEHIGH ACRES, FL 33971

New Mailing Address:

4937 LEONARD BLVD S
LEHIGH ACRES, FL 33973

FEI Number: 26-2282175

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

METRO BUSINESS SOLUTIONS, INC.
5245 RAMSEY WAY
SUITE 4
FT MYERS, FL 33907 US

Name and Address of New Registered Agent:

CARLETTO, OCIMAR
4937 LEONARD BLVD S
LEHIGH ACRES, FL 33973 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: OCIMAR CARLETTO

03/12/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CARLETTO, OCIMAR
Address: 4937 LEONARD BLVD
City-St-Zip: LEHIGH ACRES, FL 33971

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CARLETTO, OCIMAR
Address: 4937 LEONARD BLVD S
City-St-Zip: LEHIGH ACRES, FL 33973

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: OCIMAR CARLETTO

P

03/12/2009

Electronic Signature of Signing Officer or Director

Date