

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000048649

Entity Name: PAZZO, INC.

FILED
Apr 21, 2009
Secretary of State

Current Principal Place of Business:

12401 ORANGE DRIVE
SUITE 210
DAVIE, FL 33330

New Principal Place of Business:

11870 W. STATE ROAD 84
SUITE C-8
DAVIE, FL 33325 US

Current Mailing Address:

12401 ORANGE DRIVE
SUITE 210
DAVIE, FL 33330

New Mailing Address:

11870 W. STATE ROAD 84
SUITE C-8
DAVIE, FL 33325 US

FEI Number: 26-2731599

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRODY, JONATHAN
2850 NORTH ANDREWS AVENUE
FT. LAUDERDALE, FL 33311 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BAST, RANDALL
Address: 12401 ORANGE DRIVE, SUITE 210
City-St-Zip: DAVIE, FL 33330

Title: D () Delete
Name: GILREATH, ANGELA
Address: 12401 ORANGE DRIVE, SUITE 210
City-St-Zip: DAVIE, FL 33330

Title: D () Delete
Name: GILREATH, LEE
Address: 12401 ORANGE DRIVE, SUITE 210
City-St-Zip: DAVIE, FL 33330

Title: D () Delete
Name: MANSELL, SHERRI
Address: 12401 ORANGE DRIVE, SUITE 210
City-St-Zip: DAVIE, FL 33330

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: BAST, RANDALL
Address: 11870 W STATE ROAD 84 SUITE C-8
City-St-Zip: DAVIE, FL 33325 US

Title: PRES (X) Change () Addition
Name: GILREATH, ANGELA
Address: 11870 W STATE ROAD 84 SUITE C-8
City-St-Zip: DAVIE, FL 33325 US

Title: VP (X) Change () Addition
Name: GILREATH, LEE
Address: 11870 W STATE ROAD 84 SUITE C-8
City-St-Zip: DAVIE, FL 33325 US

Title: CFO (X) Change () Addition
Name: MANSELL, SHERRI
Address: 11870 W STATE ROAD 84 SUITE C-8
City-St-Zip: DAVIE, FL 33325 US

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: SHERRI MANSELL

CFO

04/21/2009

Electronic Signature of Signing Officer or Director

_____ Date