

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000108411

Entity Name: PETER SANTOLALLA INC

**FILED**  
**Apr 11, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

6000 NW 2ND AVE APT 139  
BOCA RATON, FL 33487

**New Principal Place of Business:**

6000 NW 2ND AVE  
139  
BOCA RATON, FL 33487

**Current Mailing Address:**

6000 NW 2ND AVE APT 139  
BOCA RATON, FL 33487

**New Mailing Address:**

6000 NW 2ND AVE  
139  
BOCA RATON, FL 33487

FEI Number: 45-4067003

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SANTOLALLA, PETER  
6000 NW 2ND AVE APT 139  
BOCA RATON, FL 33487 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: PR  
Name: SANTOLALLA, PETER  
Address: 6000 NW 2ND AVE APT 139  
City-St-Zip: BOCA RATON, FL 33487

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: PETER SANTOLALLA

PR

04/11/2012

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

\_\_\_\_\_  
Date