2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P35666

Title:

Name:

Address:

City-St-Zip:

FILED Apr 27, 2006 Secretary of State

Entity Na	me: H. COTU	RRI AND SONS, LTD. INC.				
Current Principal Place of Business:			New Principal Place of Business:			
	ERPRISE RD .EN, CA 95442	2				
Current Mailing Address:			New Mailing Address:			
P.O. BOX GLEN ELL	396 .EN, CA 95442	2				
FEI Number	: 94-2605395	FEI Number Applied For ()	FEI Number Not Appl	icable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:			
3170 W. T	LEE SALES CO					
	named entity s e of Florida.	submits this statement for the pu	urpose of changing i	ts registered	office or registered agent, or b	oth,
SIGNATU						
	Electron	ic Signature of Registered Age	nt		Date	
Election Car	mpaign Financing	g Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	P () COTURRI, FER 195 RAYMOND SAN FRANCISC	AVE	Title: Name: Address: City-St-Zip:	P (2 COTURRI, TO 6725 ENTERF GLEN ELLEN	PRISE ROAD	
Title: Name: Address: City-St-Zip:	V () COTURRI, TON 6725 ENTERPE GLEN ELLEN, C	RISE RD	Title: Name: Address: City-St-Zip:	V (X COTURRI, PH 16600 NORBO SONOMA, CA	OM ROAD	
Title: Name: Address: City-St-Zip:	S () COTURRI, PHIL 66600 NORBON SONOMA, CA	·	Title: Name: Address: City-St-Zip:	S (2 COTURRI, LIN 6725 ENTERF GLEN ELLEN	PRISE ROAD	
Title: Name: Address: City-St-Zip:	D () SERRATTO, MI 1220 HOWARD BURLINGAME,	AVE. #250	Title: Name: Address: City-St-Zip:	() Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: LINDA COTURRI S 04/27/2006

() Delete

COTURRI, LINDA

GLEN ELLEN, CA

6725 ENTERPRISE RD

(X) Change () Addition

COTURRI, LINDA

6725 ENTERPRISE RD

GLEN ELLEN, CA 95442