2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000076276

Entity Name: TRAVERTINO TRADING COMPANY

FILED Jan 09, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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1515 NW 167TH ST 20401 NW 2ND AVENUE

STE 460 BLDG 7 SUITE 216

MIAMI, FL 33169 MIAMI GARDENS, FL 33169 US

Current Mailing Address: New Mailing Address:

1515 NW 167TH ST 20401 NW 2ND AVENUE

STE 460 BLDG 7 SUITE 216

MIAMI, FL 33169 US MIAMI GARDENS, FL 33169 US

FEI Number: 65-0828570 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

LABATE, MARK J 17 SE 24TH AVE

POMPANO BEACH, FL 33062 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:

Date

Electronic Signature of Registered Agent

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

LOSACCO, SILVIO V LOSACCO, SILVIO V Name: Name: 1515 NW 167TH ST STE 460 BLDG 7 20401 NW 2ND AVENUE Address: Address: City-St-Zip: MIAMI, FL 33169 City-St-Zip: MIAMI GARDENS, FL 33169

Title: TVPD () Delete Title: TVPD (X) Change () Addition CAPPELLI, ATTILIO Name: CAPPELLI, ATTILIO Name:

1515 NW 167TH ST STE 460 BLDG 7 20401 NW 2ND AVENUE Address: Address: MIAMI, FL 33169 MIAMI GARDENS, FL 33169 City-St-Zip: City-St-Zip:

Title: Title: AS () Delete () Change () Addition

LABATE, MARK J Name: Name: 17 SE 24TH AVE Address: Address: City-St-Zip: POMPANO BEACH, FL 33062 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: SILVIO LOSACCO DP 01/09/2009