

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 21, 2007 8:00 am**  
**Secretary of State**

03-21-2007 90040 030 \*\*\*150.00

**DOCUMENT # P99000002257**

1. Entity Name

MANCINELLI INVESTMENT GROUP, INC.



Principal Place of Business

3256 12TH ST NORTH  
SAINT PETERSBURG FL 33703  
US

Mailing Address

P O BOX 668  
ST PETERSBURG FL 33731  
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-3551611**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

1st MOORE

CR2E034 (10/06)

6. Name and Address of Current Registered Agent

MANCINELLI, PAUL  
3256 12TH ST NORTH  
SAINT PETERSBURG FL 33703

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee Will Be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE: P  
NAME: MANCINELLI, PAUL  
STREET ADDRESS: 340 4TH ST. S.  
CITY- ST- ZIP: SAINT PETERSBURG FL 33701 ☐ Delete

TITLE: VP  
NAME: BLANK, SCOTT P  
STREET ADDRESS: 3918 PALMICA AVE  
CITY- ST- ZIP: TAMPA FL 33629 ☐ Delete

TITLE:   
NAME:   
STREET ADDRESS:   
CITY- ST- ZIP: ☐ Delete

TITLE:   
NAME:   
STREET ADDRESS:   
CITY- ST- ZIP: ☐ Delete

TITLE:   
NAME:   
STREET ADDRESS:   
CITY- ST- ZIP: ☐ Delete

TITLE:   
NAME:   
STREET ADDRESS:   
CITY- ST- ZIP: ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: President  
NAME: Paul Mancinelli  
STREET ADDRESS: 3256 12th St North  
CITY- ST- ZIP: St. Petersburg FL 33704 ☒ Change ☐ Addition

TITLE:   
NAME:   
STREET ADDRESS:   
CITY- ST- ZIP: ☐ Change ☐ Addition

TITLE:   
NAME:   
STREET ADDRESS:   
CITY- ST- ZIP: ☐ Change ☐ Addition

TITLE:   
NAME:   
STREET ADDRESS:   
CITY- ST- ZIP: ☐ Change ☐ Addition

TITLE:   
NAME:   
STREET ADDRESS:   
CITY- ST- ZIP: ☐ Change ☐ Addition

TITLE:   
NAME:   
STREET ADDRESS:   
CITY- ST- ZIP: ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

SIGNATURE, TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-12-07

Date

727-409-8227

Daytime Phone #