

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S96257

Entity Name: BARTUCCIO, INC.

FILED
Mar 19, 2007
Secretary of State

Current Principal Place of Business:

1709/1717 SHEMANDOAH ST.
HOLLYWOOD, FL 33020 US

New Principal Place of Business:

Current Mailing Address:

1506 COOLIDGE STREET
HOLLYWOOD, FL 30020 US

New Mailing Address:

1506 COOLIDGE STREET
HOLLYWOOD, FL 33020 US

FEI Number: 65-0298277

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARTUCCIO, DOMENICO
1506 COOLIDGE ST
HOLLYWOOD, FL 33020 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: PD () Delete
Name: BARTUCCIO, DOMENICO
Address: 1506 COOLIDGE ST
City-St-Zip: HOLLYWOOD, FL 33020

Title: VD () Delete
Name: BARTUCCIO, ROSA
Address: 1506 COOLIDGE ST
City-St-Zip: HOLLYWOOD, FL 33020

Title: TD () Delete
Name: BARTUCCIO, ANTONIO
Address: 1506 COOLIDGE ST
City-St-Zip: HOLLYWOOD, FL 33020

Title: SD () Delete
Name: BARTUCCIO, MARY
Address: 1506 COOLIDGE ST
City-St-Zip: HOLLYWOOD, FL 33020

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: DOMENICO BARTUCCIO

PD

03/19/2007

Electronic Signature of Signing Officer or Director

Date