

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V29754

FILED
May 05, 2008
Secretary of State

Entity Name: ANTHONY MUTTILLO ENTERPRISES, INC.

Current Principal Place of Business:

4024 NW SECOND COURT
BOCA RATON, FL 33431 US

New Principal Place of Business:

Current Mailing Address:

4024 NW SECOND COURT
BOCA RATON, FL 33431 US

New Mailing Address:

FEI Number: 65-0328995 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MUTTILLO, ANTHONY
4024 N.W. 2ND COURT
BOCA RATON, FL 33431 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MUTTILLO, ANTHONY
Address: 4024 N.W. 2ND CT
City-St-Zip: BOCA RATON, FL

Title: V () Delete
Name: MUTILLO, RACHELL
Address: 4024 N.W. 2ND CT
City-St-Zip: BOCA RATON, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: ANTHONY MUTTILLO

P

05/05/2008

_____ Electronic Signature of Signing Officer or Director

_____ Date