2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V46523

FILED Mar 13, 2009 Secretary of State

Entity Name: PHIL CITTADINO MANAGEMENT, INC.

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
SUITE 204	TARY TRAIL .C BEACH, FL 334	84 US		
Current M	ailing Addres	s:	New Mailing Address	s:
SUITE 204	TARY TRAIL ·C BEACH, FL 334	84 US		
FEI Number:	65-0340566	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:		Name and Address of	Name and Address of New Registered Agent:	
	O, PHILIP			
1850 TRA\ WEST PAI	VIS ROAD _M BEACH, FL		ourpose of changing its registere	d office or registered agent, or both,
1850 TRA\ WEST PAI The above	VIS ROAD _M BEACH, FL		ourpose of changing its registere	d office or registered agent, or both,
1850 TRA\ WEST PAI The above	VIS ROAD LM BEACH, FL named entity set of Florida. RE:	ubmits this statement for the p		
1850 TRA\ WEST PA	VIS ROAD LM BEACH, FL named entity set of Florida. RE:			d office or registered agent, or both, Date
1850 TRA\ WEST PAI The above n the State	VIS ROAD LM BEACH, FL named entity set of Florida. RE: Electroni	ubmits this statement for the p		
1850 TRA\ WEST PAI The above n the State SIGNATUF	VIS ROAD LM BEACH, FL named entity set of Florida. RE: Electroni	ubmits this statement for the p c Signature of Registered Age Trust Fund Contribution ().	ent	
1850 TRA\ WEST PAI The above n the State SIGNATUF	VIS ROAD LM BEACH, FL named entity set of Florida. RE: Electroni npaign Financing S AND DIRECT	ubmits this statement for the p c Signature of Registered Age Trust Fund Contribution (). CORS: Delete LIP DAD	ent	Date

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: PHILIP CITTADINO D 03/13/2009