## 2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000045005

Entity Name: ADVANCED CNC MANUFACTURING, INC.

**Current Principal Place of Business:** 

2313 DESTINY WAY ODESSA, FL 33556

**Current Mailing Address:** 

P.O. BOX 991

ODESSA, FL 33556

FEI Number: 61-1412132 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CARROSSO, MARIA 2313 DESTINY WAY ODESSA, FL 33556 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:

Electronic Signature of Registered Agent

Date

**FILED** Apr 30, 2013

**Secretary of State** 

CC0487284828

## Officer/Director Detail:

Title	PD	Title	D
Name	CARROSSO, MIGUEL A	Name	CARROSSO, MARIA I
Address	2313 DESTINY WAY	Address	2313 DESTINY WAY

City-State-Zip: ODESSA FL 33556 City-State-Zip: ODESSA FL 33556

Title D Title D

Name CARROSSO, MARIA M Name CARROSSO, MARIA G Address 2313 DESTINY WAY Address 2313 DESTINY WAY ODESSA FL 33556 City-State-Zip: City-State-Zip: ODESSA FL 33556

Title Title 0

Name CARROSSO, MARIA M CARROSSO, MARIA I Name Address 2313 DESTINY WAY 2313 DESTINY WAY Address City-State-Zip: ODESSA FL 33556 City-State-Zip: ODESSA FL 33556

I hereby 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 all other like empowered.

SIGNATURE: MARIA CARROSSO **OFFICER** 

Electronic Signature of Signing Officer/Director Detail

04/30/2013

Date