

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000062053

**Entity Name:** ROBERT DISTEFANO, INC.

**Current Principal Place of Business:**

431 JUPITER AVE. NW  
LAKE PLACID, FL 33852

**FILED**  
**Apr 19, 2017**  
**Secretary of State**  
**CC3635946226**

**Current Mailing Address:**

411 NW 215TH AVE.  
PEMBROKE PINES, FL 33029 US

**FEI Number: 03-0590081**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

DISTEFANO, ROBERT  
411 NW 215TH AVE.  
PEMBROKE PINES, FL 33029 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

**Officer/Director Detail :**

Title P/D  
Name DISTEFANO, ROBERT  
Address 411 NW 215TH AVE.  
City-State-Zip: PEMBROKE PINES FL 33029

Title VP/D  
Name DISTEFANO, MARY LOU  
Address 411 NW 215TH AVE.  
City-State-Zip: PEMBROKE PINES FL 33029

*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: ROBERT DISTEFANO**

**PRES.**

**04/19/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date