

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P12000066630

**Entity Name:** ELENA DELLA-PIETRA, INC.

**Current Principal Place of Business:**

899 SW LOST RIVER SHORES DR  
STUART, FL 34997

**Current Mailing Address:**

899 SW LOST RIVER SHORES DR  
STUART, FL 34997 US

**FEI Number: 46-0725768**

**Certificate of Status Desired: No**

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

DELLA-PIETRA, ELENA  
899 SW LOST RIVER SHORES DR  
STUART, FL 34997 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, SECRETARY  
Name DELLA-PIETRA, ELENA  
Address 899 SW LOST RIVER SHORES DR  
City-State-Zip: STUART FL 34997

*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: ELENA DELLA-PIETRA**

**PRESIDENT**

**04/29/2013**

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

\_\_\_\_\_ Date