

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P95000036691

**Entity Name:** CRISTELLO ENTERPRISES, INC.

**Current Principal Place of Business:**

2915 BURR OAK DR  
TAMPA, FL 33618-1413

**Current Mailing Address:**

2915 BURR OAK DR  
TAMPA, FL 33618-1413

**FEI Number: 59-3314652**

**Certificate of Status Desired: No**

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

CRISTELLO, NICHOLAS  
2915 BURR OAK DR  
TAMPA, FL 33618-1413 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	Title	VP
Name	CRISTELLO, NICHOLAS	Name	CRISTELLO, ALISON M
Address	2915 BURR OAK DR	Address	2915 BURR OAK DR
City-State-Zip:	TAMPA FL 33618-1413	City-State-Zip:	TAMPA FL 33618-1413

Title OFFICER  
 Name CRISTELLO, NICHOLAS II  
 Address 2915 BURR OAK DR  
 City-State-Zip: TAMPA FL 33618-1413

*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: NICHOLAS CRISTELLO**

**PRESIDENT**

**04/01/2016**

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

\_\_\_\_\_  
Date