

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H08622

FILED  
Feb 16, 2010  
Secretary of State

**Entity Name:** RENZO'S ITALIAN RESTAURANT, INC.

**Current Principal Place of Business:**

5999 N. FEDERAL HWY  
BOCA RATON, FL 33487 US

**New Principal Place of Business:**

**Current Mailing Address:**

5999 N. FEDERAL HWY  
BOCA RATON, FL 33487 US

**New Mailing Address:**

**FEI Number:** 59-2432266      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

SCIORTINO, LORENZO  
5999 N. FEDERAL HWY  
BOCA RATON, FL 33487 US

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

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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: SCIORTINO, LORENZO  
Address: 5999 N. FEDERAL HWY  
City-St-Zip: BOCA RATON, FL 33487 US

Title: VPD  
Name: PIEDISCALZI, COSIMO  
Address: 5999 N. FEDERAL HWY  
City-St-Zip: BOCA RATON, FL 33487 US

Title: ST  
Name: SCIORTINO, ROSARIO  
Address: 5999 N. FEDERAL HWY  
City-St-Zip: BOCA RATON, FL 33487 US

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: LORENZO SCIORTINO

PD

02/16/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date