2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # K67234

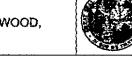
1. Entity Name

VILLA ROSE PIZZA AND GROCERY OF HOLLYWOOD,

INC.

Principal Place of Business

C/O HARA KIAGIADAKIS 1114 N STATE RD 7



FILED Jan 17, 2006 08:00 AM **Secretary of State**

HOLLYWOOD, FL 33021

Mailing Address C/O HARA KIAGIADAKIS 1114 N STATE RD 7 HOLLYWOOD, FL 33021



01092006

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0098082

Applied For Not Applicable

5. Certificate of Status Désiréd

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

KIAGIADOKIS, HARA 9600 SGA TURTLE DR FORT LAUDERDALE, FL 33324

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE					
Statisture, typed or printed regime of registered expose end little it explicable. (NOTE, Registered Agen) about about inequire required when remarkable.					
FILE NOWIII FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Finar Trust Fund Contribution.			· 🗆	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KIAGIADAKIS, HARA 1114 NORTH STATE ROAD 7 HOLLYWOOD, FL 33021				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					01/19706-80058-020 150.00
TITLE NAME STREET ADDRESS CITY-ST-JIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN T	THIS SPACE
TITLE NAME STREET ACKINESS CITY-ST-ZIP				· ··-	
TITLE NAME STREET ADDRESS CITY+ST-ZIP					
12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					