2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2005
Secretary of State

DOCUMENT# L79429

Entity Name: FRASCATI'S ITALIAN RESTAURANT & DELI, INC.

Current Principal Place of Business:

1258 AIRPORT RD. N.
NAPLES, FL 34104 US

New Principal Place of Business:

Current Mailing Address:

1258 AIRPORT RD. N.
NAPLES, FL 34104 US

New Mailing Address:

FEI Number: 65-0229843 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

OLAYOS, CORINNE M
1258 N. AIRPORT RD.
NAPLES, FL 34104 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: PS ( ) Delete
Name: CERNIGLIA, CHARLES J
Address: 1723 GALLOWAY CIRCLE
City-St-Zip: BARRINGTON, IL 60010 US

Title: VPTS ( ) Delete
Name: OLAYOS, CORINNE M
Address: 1495 VINTAGE LANE
City-St-Zip: NAPLES, FL 34104 US

Title: D ( ) Delete
Name: CERNIGLIA, CATHERINE L
Address: 1723 GALLOWAY CIRCLE
City-St-Zip: BARRINGTON, IL 60010 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VPTS (X) Change ( ) Addition
Name: OLAYOS, CORINNE M
Address: 1479 PALMA BLANCA CT.
City-St-Zip: NAPLES, FL 34119 US

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: CORINNE M. OLAYOS VPTS 04/15/2005

Electronic Signature of Signing Officer or Director Date