

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000044706

FILED
Jul 24, 2008
Secretary of State

Entity Name: NAPOLI'S PIZZA CUISINE. INC.

Current Principal Place of Business:

1531 MONUMENT RD.
SUITE 7
JACKSONVILLE, FL 32225

New Principal Place of Business:

5624 ARLINGTON RD.
JACKSONVILLE, FL 32211

Current Mailing Address:

1531 MONUMENT RD.
SUITE 7
JACKSONVILLE, FL 32225

New Mailing Address:

5624 ARLINGTON RD.
JACKSONVILLE, FL 32211

FEI Number: 59-1066178

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALLEY, MAURICE L
1531 MONUMENT RD.
SUITE 7
JACKSONVILLE, FL 32225 US

Name and Address of New Registered Agent:

WALLEY, MAURICE L
5624 ARLINGTON RD.
JACKSONVILLE, FL 32211 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: MAURICE L. WALLEY

07/24/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: WALLEY, HONORINA
Address: 1531 - 7 MONUMENT RD.
City-St-Zip: JACKSONVILLE, FL 32225

Title: DVS () Delete
Name: WALLEY, MAURICE L
Address: 1531 - 7 MONUMENT RD.
City-St-Zip: JACKSONVILLE, FL 32225

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: MAURICE L. WALLEY

DVS

07/24/2008

Electronic Signature of Signing Officer or Director

Date