2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2004
Secretary of State

DOCUMENT# P02000084079

Entity Name: ITALIAN TABLE, INC.

Current Principal Place of Business:

2140 SOUTH CHICKASAW TRAIL
ORLANDO, FL 32825

New Principal Place of Business:

Current Mailing Address:

820 LK KATHRYN CIR
CASSELBERRY, FL 32707

New Mailing Address:

FEI Number: 13-4218327 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NIKOLLAJ, JOZEF
2140 SOUTH CHICKASAW TRAIL
ORLANDO, FL 32825

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: D ( ) Delete
Name: NIKOLLAJ, JOZEF
Address: 2140 SOUTH CHICKASAW TRAIL
City-St-Zip: ORLANDO, FL 32825

Title: D ( ) Delete
Name: CHIARENZA, CHARLES J JR.
Address: 2140 SOUTH CHICKASAW TRAIL
City-St-Zip: ORLANDO, FL 32825

Title: D ( ) Delete
Name: ALMONANI, MOHAMMAD
Address: 2140 SOUTH CHICKASAW TRAIL
City-St-Zip: ORLANDO, FL 32825

Title: D ( ) Delete
Name: MASTRANTONI, LUIGI
Address: 2140 SOUTH CHICKASAW TRAIL
City-St-Zip: ORLANDO, FL 32825

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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: JOZEF NIKOLLAJ PRES 04/05/2004

Electronic Signature of Signing Officer or Director — Date