

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000059345

FILED
May 24, 2005
Secretary of State

Entity Name: PORTOFINO ITALIAN RISTORANTE, INC.

Current Principal Place of Business:

4563 44TH STREET SOUTH
ST. PETERSBURG, FL 33711

New Principal Place of Business:

Current Mailing Address:

4563 44TH STREET SOUTH
ST. PETERSBURG, FL 33711

New Mailing Address:

FEI Number: 59-3583665

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MIZIO, ARMANDO F
25400 U.S. 19 NORTH
SUITE 210
CLEARWATER, FL 33763 US

Name and Address of New Registered Agent:

MIZIO, ARMANDO F
25400 U.S. 19 HWY NORTH
SUITE 210
CLEARWATER, FL 33763 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: ARMANDO F. MIZIO

05/24/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: FISCHETTI, MICHELE
Address: 4563 44TH STREET SOUTH
City-St-Zip: ST. PETERSBURG, FL 33711

Title: VPSD () Delete
Name: FISCHETTI, ANNA
Address: 4563 44TH STREET SOUTH
City-St-Zip: ST. PETERSBURG, FL 33711

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 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: MICHELE FISCHETTI

PTD

05/24/2005

Electronic Signature of Signing Officer or Director

Date