2005 FOR PROFIT CORPORATION __ANNUAL REPORT

FILED Feb 09, 2005 08:00 AM

1. Entity Nan ITALIA, II Principal Plac D/B/A NICK' 1214 NO BP	NC. ce of Business N S BAR & GRILL	failing Address 1214 N. BROADWALK HOLLYWOOD, FL 33019 U.			Secretary of Stat
DO NOT WRITE IN THIS SPACE 5. Name and Address of Current Registered Agent				01142005 No Chg-P 4. FEI Number 59-1874806 5. Certificate of Status Desired	CR2E034 (10/03) Applied For Not Applicable \$8.75 Additional Fee Required
FERRO, CARL 1214 NO BROADWALK HOLLYWOOD, FL., FL 33019			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 Signature, typod or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees					
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FERRO, CARL 1214 NO BROADWALK HOLLYWOOD, FL	CTORS .	-	— U00	000221127 05-80019-017 150.00
NAME STREET ADDRESS CITY-ST ZIP	S FERRO, SALVATORE 1214 NO BROADWALK HOLLYWOOD, FL				05-80019-017 150.00
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V FERRO, ROBERT 1214 NO BROADWALK HOLLYWOOD, FL			DO NOT W	/RITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN THIS SI	PACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		70%			
TITLE NAME STREET ADDRESS CITY ST ZIP	·			AND STORY OF THE S	
12. I hereby certify that the information supplied with this filing does not qualify 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 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.					
SIGNATURE: CARL FORCO 1/11/05 954-920-2800 SIGNATURE AND TWIED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone of					