

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 646782

FILED
May 01, 2009
Secretary of State

Entity Name: ANTONIA'S RESTAURANT, INC.

Current Principal Place of Business:

4822 RODMAN ST NW
WASHINGTON, DC 20016

New Principal Place of Business:

5185 MACARTHUR BLVD NW #700
WASHINGTON, DC 20016

Current Mailing Address:

4822 RODMAN ST NW
WASHINGTON, DC 20016

New Mailing Address:

5185 MACARTHUR BLVD NW #700
WASHINGTON, DC 20016

FEI Number: 59-1958963

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BERTO, ANTONIA
615 DUVAL ST
KEY WEST, FL 33040 US

Name and Address of New Registered Agent:

BERTO, ANTONIA A ANTONIA
615 DUVAL ST
KEY WEST, FL 33040 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: ANTONIA BERTO

05/01/2009

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: P () Delete
Name: BERTO, ANTONIA
Address: 4822 RODMAN ST
City-St-Zip: WASHINGTON, DC 20016

Title: V () Delete
Name: SMITH, PHILLIP
Address: 822 RODMAN ST
City-St-Zip: WASHINGTON, DC 20016

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BERTO, ANTONIA A ANTONIA
Address: 5185 MACARTHUR BLVD #700
City-St-Zip: WASHINGTON, DC 20016

Title: V (X) Change () Addition
Name: SMITH, PHILLIP M ANTONIA
Address: 5185 MACARTHUR BLVD NW #700
City-St-Zip: WASHINGTON, DC 20016

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: ANTONIA BERTO

P

05/01/2009

Electronic Signature of Signing Officer or Director

Date