

2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L08000091521

FILED
Jul 08, 2009
Secretary of State**Entity Name:** D'AMATO'S ITALIAN RESTAURANT LLC**Current Principal Place of Business:**151 W. HWY 50
CLERMONT, FL 34711**New Principal Place of Business:****Current Mailing Address:**151 W. HWY 50
SUITE 306
CLERMONT, FL 34711**New Mailing Address:****FEI Number:** 26-3503300**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ALTRO, THOMAS A SR
151 W. HWY. 50
CLERMONT, FL 34711 US**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

MANAGING MEMBERS/MANAGERS:**Title:** MGR () Delete
Name: ALTRO, THOMAS A
Address: 3834 BRECKINRIDGE LANE
City-St-Zip: CLERMONT, FL 34711**Title:** MGR (X) Delete
Name: PINTO, ROBERT
Address: 1120 W. LAKESHORE DR.
City-St-Zip: CLERMONT, FL 34711**ADDITIONS/CHANGES:****Title:** MGR (X) Change () Addition
Name: ALTRO, THOMAS A SR
Address: 3834 BRECKINRIDGE LANE
City-St-Zip: CLERMONT, FL 34711**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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: THOMAS A ALTRO

MGR

07/08/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date