2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M23053

FILED Jul 01, 2004 Secretary of State

Entity Name: DIMITRI'S RESTAURANT & PIZZA, INCORPORATED

Current Principal Place of Business: New Principal Place of Business:

14590 S. MILITARY TRAIL DELRAY SQUARE DELRAY BEACH, FL 33445

Current Mailing Address: New Mailing Address:

14590 S. MILITARY TRAIL DELRAY SQUARE DELRAY BEACH, FL 33445

FEI Number: 59-2626774 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PROGRIS, DEMETRIOS

3441 BALTUSROL LANE

LAKE WORTH, FL 33467 US

PROGRIS, VICTORIA A

5068 NORTHERN LIGHTS DR.

GREENACRES, FL 33463 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: VICTORIA A. PROGRIS 07/01/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition PROGRIS, DEMETRIOS PROGRIS, VICTORIA A Name: Name: 3441 BALTUSROL LANE 5068 NORTHERN LIGHTS DR. Address: Address: City-St-Zip: LAKE WORTH, FL 33467 City-St-Zip: GREENACRES, FL 33463

 Title:
 S
 () Delete
 Title:
 T
 (X) Change () Addition

 Name:
 PROGRIS, VICTORIA
 Name:
 PROGRIS, VICTORIA

Address: 5068 NORTHERN LIGHTS DR. Address: 5068 NORTHERN LIGHTS DR. City-St-Zip: LAKE WORTH, FL 33463 City-St-Zip: LAKE WORTH, FL 33463

 Title:
 D
 () Delete
 Title:
 D
 (X) Change () Addition

 Name:
 PROGRIS, HERMIONE
 Name:
 PROGRIS, CHRISTOS D

 Address:
 3441 BALTUSROL LANE
 Address:
 2373 S.E. CALCUTTA CIR

 City-St-Zip:
 LAKE WORTH, FL 33467
 City-St-Zip:
 PT ST LUCIE, FL 34952

Title: T () Delete Title: S (X) Change () Addition

 Name:
 PROGRIS, CHRISTOS
 Name:
 PROGRIS, CHRISTOS

 Address:
 2373 CALCUTTA CIR
 Address:
 2373 CALCUTTA CIR

 City-St-Zip:
 PT ST LUCIE, FL 34952
 City-St-Zip:
 PT ST LUCIE, FL 34952

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: VICTORIA A. PROGRIS PD 07/01/2004