

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000023442

FILED
Mar 14, 2005
Secretary of State

Entity Name: RISTORANTE DA TULLIO, INC.

Current Principal Place of Business:

3309 TAMPA ROAD
PALM HARBOR, FL 34684

New Principal Place of Business:

Current Mailing Address:

3309 TAMPA ROAD
PALM HARBOR, FL 34684

New Mailing Address:

FEI Number: 59-3642989 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MASTRANGELO, TULLIO
3309 TAMPA ROAD
PALM HARBOR, FL 34684 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MASTRANGELO, TULLIO
Address: 3266 HAVILAND CT #302
City-St-Zip: PALM HARBOR, FL 34684

Title: VP () Delete
Name: MASTRANGELO, TULLIO
Address: 3266 HAVILAND CT. #302
City-St-Zip: PALM HARBOR, FL 34684

Title: T () Delete
Name: MASTRANGELO, ANNA MARIE
Address: 3266 HAVILAND CT. #302
City-St-Zip: PALM HARBOR, FL 34684

Title: S () Delete
Name: MASTRANGELO, ANNA MARIE
Address: 3266 HAVILAND CT. #302
City-St-Zip: PALM HARBOR, FL 34684

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MASTRANGELO, TULLIO
Address: 1908 BLUE RIVER ROAD
City-St-Zip: HOLIDAY, FL 34691

Title: VP (X) Change () Addition
Name: MASTRANGELO, TULLIO
Address: 1908 BLUE RIVER ROAD
City-St-Zip: HOLIDAY, FL 34691

Title: T (X) Change () Addition
Name: MASTRANGELO, ANNA MARIE
Address: 1908 BLUE RIVER ROAD
City-St-Zip: HOLIDAY, FL 34691

Title: S (X) Change () Addition
Name: MASTRANGELO, ANNA MARIE
Address: 1908 BLUE RIVER ROAD
City-St-Zip: HOLIDAY, FL 34691

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: ANNA MARIE MASTRANGELO

S

03/14/2005

Electronic Signature of Signing Officer or Director

_____ Date