

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000090828

FILED
Mar 31, 2009
Secretary of State

Entity Name: GIOVANNI RISTORANTE ITALIANO OF NAPLES, INC.

Current Principal Place of Business:

5975 PINE RIDGE ROAD
NAPLES, FL 34109

New Principal Place of Business:

Current Mailing Address:

5975 PINE RIDGE ROAD
NAPLES, FL 34109

New Mailing Address:

FEI Number: 65-1042643

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONIGLIARO, MARIA
6041 22ND AVE N.W.
NAPLES, FL 34119 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: DPT () Delete
Name: CONIGLIARO, MARIA
Address: 14629 BEAUFORT CIR
City-St-Zip: NAPLES, FL 34119

Title: VP () Delete
Name: CONIGLAIRO, GIOVANNI
Address: 14629 BEAUFORT CIR
City-St-Zip: NAPLES, FL 34119

Title: S () Delete
Name: CONIGLAIRO, MARIA
Address: 14629 BEAUFORT CIR
City-St-Zip: NAPLES, FL 34119

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change () Addition
Name: CONIGLIARO, MARIA D
Address: 14629 BEAUFORT CIR
City-St-Zip: NAPLES, FL 34119

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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: MARIA D CONIGLIARO

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03/31/2009

Electronic Signature of Signing Officer or Director

Date