

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 15, 2004 8:00 am
Secretary of State

03-15-2004 90069 038 ***150.00

DOCUMENT # P01000063607

1. Entity Name:

ROTELLI RESTAURANT, INC.



Principal Place of Business

9045 LA FONTANA BLVD STE B-1
BOCA RATON FL 33434

Mailing Address

9045 LA FONTANA BLVD STE B-1
BOCA RATON FL 33434

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-1115707

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BILOTTI, JOSEPH
9045 LA FONTANA BLVD STE B-1
BOCA RATON FL 33434

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PSD
NAME BILOTTI, JOSEPH ☐ Delete
STREET ADDRESS 9045 LA FONTANA BLVD STE B-1
CITY-ST-ZIP BOCA RATON FL 33434

TITLE PSD ☒ Change ☐ Addition
NAME Joseph Bilotti
STREET ADDRESS 4611 JOHNSON RD. #1
CITY-ST-ZIP Coconut Creek, FL. 33073

TITLE VD ☐ Delete
NAME SAHRANE, RACHID
STREET ADDRESS 9045 LA FONTANA BLVD STE B-1
CITY-ST-ZIP BOCA RATON FL 33434

TITLE VD ☒ Change ☐ Addition
NAME RACHID SAHRANE
STREET ADDRESS 4611 JOHNSON RD. #1
CITY-ST-ZIP Coconut Creek, FL. 33073

TITLE TD ☐ Delete
NAME KHALID, BENJAAFAR
STREET ADDRESS 9045 LA FONTANA BLVD STE B-1
CITY-ST-ZIP BOCA RATON FL 33434

TITLE TD ☒ Change ☐ Addition
NAME BENJAAFAR KHALID
STREET ADDRESS 4611 JOHNSON RD. #1
CITY-ST-ZIP Coconut Creek, FL. 33073

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Joseph J. Bilotti

Date

3/11/04

Daytime Phone #

954 601-0500