'2007 FOR PROFIT CORPORATION

Apr 25, 2007 08:00 A Secretary of State **ANNUAL REPORT** DOCUMENT # P02000006257 YIANNI'S OF BREVARD, INC. Mailing Address Principal Place of Business 2897 WEST NEW HAVEN AVE 2897 WEST NEW HAVEN AVE WEST MELBOURNE, FL 32904 WEST MELBOURNE, FL 32904 No Chg-P CR2E034 (11/05) 01082007 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 04-3589951 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE PIPPA, JOHN 2897 WEST NEW HAVEN AVE WEST MELBOURNE, FL 32904 IN THIS SPACE 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 II applicable. DATE (NOTE: Registered Agent eignature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOWILL FEE IS \$150.00 \Box Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 10, OFFICERS AND DIRECTORS TITLE PIPPA, JOHN NAME 2897 WEST NEW HAVEN AVE 000000731530 05/09/07-80008-017 150.00 STREET ADDRESS WEST MELBOURNE, FL 32904 CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY. ST. 7IP TOLE NAME DO NOT WRITE STREET ADDRESS CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP NAME

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the reference or trustee amposite of 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 attach

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

FILED