

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000134265

Entity Name: VILLA VENEZIA PLAZA, INC.

FILED
Mar 29, 2007
Secretary of State

Current Principal Place of Business:

1009 DEER RUN
VENICE, FL 34293

New Principal Place of Business:

Current Mailing Address:

1009 DEER RUN
VENICE, FL 34293

New Mailing Address:

FEI Number: 56-2448230

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VALENTI, SANTO
1009 DEER RUN
VENICE, FL 34293 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: SANTO VALENTI

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: VALENTI, SANTO
Address: 1009 DEER RUN
City-St-Zip: VENICE, FL 34293

Title: D () Delete
Name: VALENTI, SEBASTIANA
Address: 1009 DEER RUN
City-St-Zip: VENICE, FL 34293

Title: D () Delete
Name: SAVASTA, SEBASTIANO
Address: 1375 MAYFLOWER AVE
City-St-Zip: BRONX, NY 10461

Title: D () Delete
Name: SAVASTA, PINE
Address: 1375 MAYFLOWER AVE
City-St-Zip: BRONX, NY 34293

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: VALENTI, SANTO
Address: 1009 DEER RUN
City-St-Zip: VENICE, FL 34293

Title: DS (X) Change () Addition
Name: VALENTI, SEBASTIANA
Address: 1009 DEER RUN
City-St-Zip: VENICE, FL 34293

Title: DV (X) Change () Addition
Name: SAVASTA, SEBASTIANO
Address: 1375 MAYFLOWER AVE
City-St-Zip: BRONX, NY 10461

Title: DT (X) Change () Addition
Name: SAVASTA, PINA
Address: 1375 MAYFLOWER AVE
City-St-Zip: BRONX, NY 10461

I hereby certify that the information supplied with this filing does not qualify for the 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: SANTO VALENTI

P

03/29/2007

Electronic Signature of Signing Officer or Director

Date