


2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000037353					
1. Entity Name DINELLO RESTAURANT VENTURES, INC.					
Principal Place of Business 2701 4 ST N #102 & 103 ST PETERSBURG, FL 33704			Mailing Address 2701 4 ST N #102 & 103 ST PETERSBURG, FL 33704		
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 14-1877754	
5. Certificate of Status Desired				<input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CARMELLO, JOHN 2914 GANDY BLVD UNIT E TAMPA, FL 33611					
7. Name and Address of New Registered Agent					
Name <u>Carmello John</u>					
Street Address (P.O. Box Number is Not Acceptable) <u>6212 Interbay Ave</u>					
City <u>Tampa</u> FL Zip Code <u>33611</u>					
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 <u>[Signature]</u> DATE <u>6/21/04</u> <small>(Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.)</small>					
FILE NOW!!! FEE IS \$550.00 Due by September 8, 2004			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CARMELLO, JOHN 2914 GANDY BLVD UNIT E ST PETERSBURG, FL 33704	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Pres. Secretary, Treasurer Carmello John 6212 Interbay Ave Tampa FL 33611
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Donald Warner 4422 W. EUCLID AV TAMPA FL 33611	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		TITLE NAME STREET ADDRESS CITY-ST-ZIP	600040242656 08/17/04--01008--006 **\$550.00
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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: <u>[Signature]</u> John Carmello				Date <u>6/21/04</u> Daytime Phone # <u>813 389 2944</u>	