

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000082013

Entity Name: VIGNETO'S, INC.

FILED  
Mar 25, 2009  
Secretary of State

## Current Principal Place of Business:

1663 S. UNIVERSITY DRIVE  
PLANTATION, FL 33324

## New Principal Place of Business:

## Current Mailing Address:

1663 S. UNIVERSITY DRIVE  
PLANTATION, FL 33324

## New Mailing Address:

FEI Number: 56-2382467

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BERNARDO PROTANO, ESQUIRE, P.A.  
2500 HOLLYWOOD BLVD.  
SUITE 411  
HOLLYWOOD, FL 33020 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: DIR ( ) Delete  
Name: DIPIAZZA, VIRGINIA  
Address: 2708 EDGEWATER COURT  
City-St-Zip: WESTON, FL 33332

Title: DIR ( ) Delete  
Name: DIPIAZZA, ANGELO  
Address: 1342 S.W. 160TH AVENUE  
City-St-Zip: SUNRISE, FL 33326

Title: DIR ( ) Delete  
Name: CASTIGLIONE, FRANK  
Address: 16511 SAPPHIRE STREET  
City-St-Zip: WESTON, FL 33331

Title: DIR ( ) Delete  
Name: CASTIGLIONE, MACHAEL  
Address: 2074 PASA VERDE LANE  
City-St-Zip: WESTON, FL 33327

Title: DIR ( ) Delete  
Name: CASTIGLIONE, JOE  
Address: 2708 EDGEWATER COURT  
City-St-Zip: WESTON, FL 33332

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: FRANK CASTIGLIONE

DIR

03/25/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date