

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000000994

Entity Name: PITSOUNI DINING, INC.

FILED
Apr 01, 2008
Secretary of State

Current Principal Place of Business:

17105 SAN CARLOS BLVD #B5 & 6
FT. MYERS BEACH, FL 33931 US

New Principal Place of Business:

17105 SAN CARLOS BLVD #A1-A4
FT. MYERS BEACH, FL 33931 US

Current Mailing Address:

17105 SAN CARLOS BLVD #B5 & 6
FT. MYERS BEACH, FL 33931 US

New Mailing Address:

17105 SAN CARLOS BLVD #A1-A4
FT. MYERS BEACH, FL 33931 US

FEI Number: 20-0576151

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TSAGANIS, EVGENIA
4786 ALBACORE LANE
FT MYERS, FL 33919 US

Name and Address of New Registered Agent:

PAYNE, DEBORAH T
15961 JOHN MORRIS RD
FT MYERS, FL 33908 US

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: DEBORAH PAYNE

04/01/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: TSAGANIS, EVGENIA
Address: 4786 ALBACORE LANE
City-St-Zip: FT. MYERS, FL 33919 US

Title: C,VP () Delete
Name: TSAGANIS, EVGENIA
Address: 4786 ALBACORE LANE
City-St-Zip: FT. MYERS, FL 33919 US

Title: D,P (X) Delete
Name: PAYNE, DEBORAH
Address: 15721 SONOMA DRIVE APT 203
City-St-Zip: FT. MYERS, FL 33908 US

Title: D (X) Delete
Name: TSAGANIS, EFSTATHIOS
Address: 4786 ALBACORE LANE
City-St-Zip: FT. MYERS, FL 33919 US

Title: T,S (X) Delete
Name: TSAGANIS, EFSTATHIOS
Address: 4786 ALBACORE LANE
City-St-Zip: FT. MYERS, FL 33919 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTS (X) Change () Addition
Name: PAYNE, DEBORAH T
Address: 15961 JOHN MORRIS RD
City-St-Zip: FT. MYERS, FL 33908 US

Title: VP (X) Change () Addition
Name: TSANGIS, VASSILLIOS
Address: 15961 JOHN MORRIS RD
City-St-Zip: FT. MYERS, FL 33908 US

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: DEBORAH T PAYNE

P

04/01/2008

Electronic Signature of Signing Officer or Director

Date