

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000014674

FILED
Apr 26, 2007
Secretary of State

Entity Name: MAMMA MIA'S TRATTORIA, INC.

Current Principal Place of Business:

8855 HYPOLUXO RD
C16
LAKE WORTH, FL 33467

New Principal Place of Business:

Current Mailing Address:

639 EAST OCEAN AVE
SUITE 101
BOYNTON BEACH, FL 33425

New Mailing Address:

FEI Number: 20-0639616

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MICHAEL J MCGOEY, CPA, INC
639 E OCEAN AVE
SUITE 101
BOYNTON BEACH, FL 33435 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: PD () Delete
Name: LOGRASSO, VINCENZO
Address: 639 E OCEAN AVE 101
City-St-Zip: BOYNTON BEACH, FL 33435

Title: VP () Delete
Name: LOGRASSO, FRANCESCO
Address: 639 E OCEAN AVE 101
City-St-Zip: BOYNTON BEACH, FL 33425

Title: VP () Delete
Name: LOGRASSO, GIUSEPPE
Address: 639 E OCEAN AVE 101
City-St-Zip: BOYNTON BEACH, FL 33425

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:

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: VINCENZO LOGRASSO

PD

04/26/2007

Electronic Signature of Signing Officer or Director

Date