


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000016727
 1. Entity Name
 LUIGI PIZZA OF PLANTATION, INC.



Principal Place of Business: 2245 S OLD DIXIE HIGHWAY SHOP #C BUNNELL, FL 32110
 Mailing Address: 27 RYMSHAW DRIVE PALM COAST, FL 32164

DO NOT WRITE IN THIS SPACE



01152006 No Chg-P CR2E034 (11/05)

4. FEI Number: 20-0661256 Applied For: Not Applicable
 5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 VERDOLIVA, LUIGI
 27 RYMSHAW DRIVE
 PALM COAST, FL 32164

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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: _____ (NOTE: Registered Agent signature required when restating) DATE: _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00
 9. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	VERDOLIVA, LUIGI
STREET ADDRESS	27 RYMSHAW DRIVE
CITY - ST - ZIP	PALM COAST, FL 32164
TITLE	VP
NAME	VERDOLIVA, MELANIE
STREET ADDRESS	27 RYMSHAW DRIVE
CITY - ST - ZIP	PALM COAST, FL 32164
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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 04/21/06-00032-025 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: M. Verdoliva 3/31/06
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #