

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000061769

FILED
May 25, 2007
Secretary of State

Entity Name: LA DOLCE VITA ITALIAN PORK STORE & DELI, INC.

Current Principal Place of Business:

7813 MITCHELL BLVD
109
NEW PORT RICHEY, FL 34655

New Principal Place of Business:

Current Mailing Address:

7813 MITCHELL BLVD
109
NEW PORT RICHEY, FL 34655

New Mailing Address:

FEI Number: 54-2160043 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLASIOLI, MARIA P
1687 HARBOR OAKS DR
TARPON SPRINGS, FL 34689 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BLASIOLI, MARIA P
Address: 1687 HARBOR OAKS DR
City-St-Zip: TARPON SPRINGS, FL 34689

Title: VP () Delete
Name: BLASIOLI, ANNA M VP
Address: 4020 LEXINGTON COURT
City-St-Zip: LARGO, FL 33771

Title: M () Delete
Name: BLASIOLI, EDWARD J M
Address: 1687 HARBOR OAKS DR
City-St-Zip: TARPON SPRINGS, FL 34689

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 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: MARIA BLASIOLI

P

05/25/2007

Electronic Signature of Signing Officer or Director

_____ Date