

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000138089

Entity Name: MATTEO'S PIZZERIA, INC.

FILED
Jun 08, 2007
Secretary of State

Current Principal Place of Business:

185 WILDWOOD DR.
SANFORD, FL 32773

New Principal Place of Business:

1285 SEMINOLA BOULEVARD
CASSELBERRY, FL 32707

Current Mailing Address:

185 WILDWOOD DRIVE
SANFORD, FL 32773

New Mailing Address:

4923 NORTH PINE AVENUE
WINTER PARK, FL 32792 US

FEI Number: 26-0313993

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PIPITONE, MICHAEL
185 WILDWOOD DRIVE
SANFORD, FL 32773 US

Name and Address of New Registered Agent:

AVILES-YAEGER LAW OFFICE, PLC
4923 NORTH PINE AVENUE
WINTER PARK, FL 32792 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: ADA M. AVILES-YAEGER

06/08/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: PIPITONE, MICHAEL
Address: 185 WILDWOOD DRIVE
City-St-Zip: SANFORD, FL 32773

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: WOODLING, JAMES G
Address: 4923 NORTH PINE AVENUE
City-St-Zip: WINTER PARK, FL 32792 US

Title: VP () Change (X) Addition
Name: AVILES, ISMAEL
Address: 4923 NORTH PINE AVENUE
City-St-Zip: WINTER PARK, FL 32792 US

Title: SECR () Change (X) Addition
Name: AVILES-YAEGER, ADA M
Address: 4923 NORTH PINE AVENUE
City-St-Zip: WINTER PARK, FL 32792 US

Title: TRES () Change (X) Addition
Name: AVILES-YAEGER, ADA M
Address: 4923 NORTH PINE AVENUE
City-St-Zip: WINTER PARK, FL 32792 US

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: ADA M. AVILES-YAEGER

SECR

06/08/2007

Electronic Signature of Signing Officer or Director

Date