2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 13, 2006 8:00 am
Secretary of State
05-03-2006 90259 006 ***150.00

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1. Entity Name
ITALGREEK INC.

Principal Place of Business	Mailing Address
441 S STATE RD 7 #15 MARGATE, FL 33068	441 S STATE RD 7 #15 MARGATE, FL 33068

66018649

01162006 Chg-P CR2E034 (11/05)

2. Principal Place of Business	3. Mailing Address
3333 W Commercial	3333 W Commercial
Suite, Apt. #, etc. 110	Suite, Apt. #, etc. 110
City & State Ft Lauderdale FL.	City & State Ft. Lauderdale FL
Zip 33309 Country US	Zip 33309 Country US

4. FEI Number 20-3212121 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
HOWITT, STUART 441 S STATE RD 7 #15 MARGATE, FL 33068	Name Street Address (P.O. Box Number is Not Acceptable) 3333 W Commercial Blvd 110 City Ft. Lauderdale FL Zip Code 33309

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 _____ 4/21/06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MAXAKOULIS, THOMAS 12560 COLONY PRESERVE DR BOYNTON BCH, FL 33436	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D D'AIUTO, FRANK 19220 BLACK MANGROVE CT BOCA RATON, FL 33348	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CERBONE, UMBERTO 1935 LAS COLINAS WAY CORAL SPRING, FL 33071	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PASQUALE DIMEGLIO SR. 8081 NW 11 STREET MARGATE, FL 33068	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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: Frank D'Aiuto FRANK D'AIUTO 5/1/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #