

**2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P05000115157

**FILED**  
**Nov 06, 2008**  
**Secretary of State****Entity Name:** SANTO'S PIZZA RESTAURANT INC.**Current Principal Place of Business:**1319 NE SUNVIEW TERR.  
JENSEN BEACH, FL 34957 US**New Principal Place of Business:****Current Mailing Address:**2688 N E DIXIE HWY  
JENSEN BEACH, FL 34957 US**New Mailing Address:**1319 NE SUNVIEW TERR.  
JENSEN BEACH, FL 34957 US**FEI Number:** 20-3415958**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**GAMBINA, VITO  
2688 N E DIXIE HIGHWAY  
JENSEN BEACH, FL 34957 US**Name and Address of New Registered Agent:**HYDE, KAREN  
1319 NE SUNVIEW TERR.  
JENSEN BEACH, FL 34957 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: KAREN HYDE

11/06/2008

\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**OFFICERS AND DIRECTORS:****Title:** PD ( ) Delete  
**Name:** HYDE, KAREN  
**Address:** 4354 NE SKYLINE AVE  
**City-St-Zip:** JENSEN BEACH, FL 34957 US**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****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: KAREN HYDE

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11/06/2008

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Electronic Signature of Signing Officer or Director\_\_\_\_\_  
Date