2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 02, 2008 08:00 AN Secretary of State

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1. Entity Name N'TINO'S INC.



Principal Place of Business

3572 TUNDRA ROAD VENICE, FL 34293 Mailing Address

3572 TUNDRA ROAD VENICE, FL 34293



DO NOT WRITE IN THIS SPACE

04292008 No Chg-P CR2E034 (11/05)

2004 (1703)

4. FEI Number NOT APPLICABLE

Not Applicable

Applied For

5. Certificate of Status Desired

\$8.75 Additional Fee Required

Daytime Phone #

6. Name and Address of Current Registered Agent

ANTONARAS, JOHN 3572 TUNDRA ROAD VENICE, FL 34293

DO NOT WRITE IN THIS SPACE

| the obligations of registered agent. | | | | | | | | | | | |
|---|---|------------------------------------|-------------------------------------|---|--|--|--|--|--|--|--|
| SIGNATURE Signature (yped or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE | | | | | | | | | | | |
| Signature typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE | | | | | | | | | | | |
| F1LE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. | | | g 🗆 | \$5.00 May Be Added to Fees | U00000944972 05/29/08-80121-020 150.00 | | | | | | |
| 10. | OFFICERS AND DIREC | TORS | | | | | | | | | |
| TITLE | PD | | | | | | | | | | |
| NAME | ANTONARAS, ANTHONY | | | | | | | | | | |
| STREET ADDRESS | 3572 TUNDRA ROAD | | | | | | | | | | |
| CITY-ST-ZIP | VENICE, FL 34293 | | | | | | | | | | |
| TITLE | VPD | | | | | | | | | | |
| NAME | ANTONARAS, JOHN | | | | | | | | | | |
| STREET ADDRESS | 3572 TUNDRA ROAD | | | | | | | | | | |
| C17Y-SF-21P | VENICE, FL 34293 | | | | | | | | | | |
| TITLE | | | | | | | | | | | |
| NAME | | | | | | | | | | | |
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| STREET ADDRESS | | | | | | | | | | | |
| CHY-ST-ZIP | | | | | , | | | | | | |
| of the car | pertify that the information supplied with this fill on this report or supplemental report is true all poration or the receiver or trustee empowered or on an attachment with an address, with all | to execute this report as required | otions cor shall have by Chap | ntained in Chapter 11! ve the same legal effe ter 607, Florida Statut | 9. Florida Statutes. I further certify that the information ct as if made under oath; that I am an officer or director es, and that my name appears in Block 10 or Block 11 if | | | | | | |

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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