

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000129049

FILED
Mar 03, 2006
Secretary of State

Entity Name: UMBERTO'S OF PORT ST. LUCIE INC.

Current Principal Place of Business:

C/O SOUTH BROWARD ACCOUNTING SEREVICE INC
1152 N UNIVERSITY DRIVE STE 202
PEMBROKE PINES, FL 33024

New Principal Place of Business:

5489 ST JAMES DRIVE
PORT ST LUCIE, FL 34983

Current Mailing Address:

C/O SOUTH BROWARD ACCOUNTING SEREVICE INC
1152 N UNIVERSITY DRIVE STE 202
PEMBROKE PINES, FL 33024

New Mailing Address:

5489 ST JAMES DRIVE
PORT ST LUCIE, FL 34983

FEI Number: 20-3513469

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHEDIAK, MIRTA
1152 N UNIVERSITY DRIVE STE 202
PEMBROKE PINES, FL 33024 US

Name and Address of New Registered Agent:

HIXON, DAVE
16100 NE 16 AVE
MIAMI BEACH, FL 33162 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: DAVE HIXON

03/03/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CORTEO, SALVATORE
Address: 20420 SW 48 PLACE
City-St-Zip: FT. LAUDERDALE, FL 33352

Title: D () Delete
Name: CORTEO, GIONANNI
Address: 20420 SW 48 PLACE
City-St-Zip: PEMBROKE PINES, FL 33352

Title: D () Delete
Name: COPPOLA, GENNARO
Address: 11602 NW 13 MANOR
City-St-Zip: CORAL SPRINGS, FL 33071

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CORTEO, SALVATORE
Address: 20420 SW 48 PLACE
City-St-Zip: FT. LAUDERDALE, FL 33332

Title: VP (X) Change () Addition
Name: CORTEO, GIOVANNI
Address: 20420 SW 48 PLACE
City-St-Zip: FT LAUDERDALE, FL 33332

Title: S (X) Change () Addition
Name: COPPOLA, GENNARO
Address: 11602 NW 13 MANOR
City-St-Zip: CORAL SPRINGS, FL 33071

Title: D () Change (X) Addition
Name: CORTEO, STEVEN
Address: 15421 DOVER CT
City-St-Zip: DAVIE, FL 33331

I hereby certify that the information supplied with this filing does not qualify for the 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: SALVATORE CORTEO

P

03/03/2006

Electronic Signature of Signing Officer or Director

Date