

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000146351

FILED
Apr 22, 2009
Secretary of State

Entity Name: LA BORGATA RISTORANTE & PIZZERIA, INC.

Current Principal Place of Business:

3227 SW MAPP ROAD
PALM CITY, FL 34990 US

New Principal Place of Business:

Current Mailing Address:

3227 SW MAPP ROAD
PALM CITY, FL 34990 US

New Mailing Address:

FEI Number: 20-3723761

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TENBERG, CYNTHIA L
2470 NE 23RD STREET
POMPAHO BEACH, FL 33062 US

Name and Address of New Registered Agent:

DIFEDE, ROSALIA
3227 SW MAPP ROAD
PALM CITY, FL 34990 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: ROSALIA DIFEDE

04/22/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DOMENICO, DIFEDE
Address: 4820 SW LAKE GROVE CT
City-St-Zip: PALM CITY, FL 34990

Title: S () Delete
Name: CORTICCHIA, ANTHONY
Address: 4820 SW LAKE GROVE CR
City-St-Zip: PALM CITY, FL 34990

Title: T () Delete
Name: DI FEDE, ROSALIA
Address: 4820 SW LAKE GROVE CR
City-St-Zip: PALM CITY, F; 34990

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: DI FEDE, ROSALIA
Address: 4820 SW LAKE GROVE CR
City-St-Zip: PALM CITY, FL 34990

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: ROSALIA DIFEDE

T

04/22/2009

Electronic Signature of Signing Officer or Director

Date