

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000153391

FILED
Apr 28, 2009
Secretary of State

Entity Name: MAMMA MIA PIZZA, PASTA & MORE INC

Current Principal Place of Business:

5869 W ATLANTIC AVE
A3
DELRAY BEACH, FL 33484

New Principal Place of Business:

Current Mailing Address:

5869 W ATLANTIC AVE
A3
DELRAY BEACH, FL 33484

New Mailing Address:

FEI Number: 20-8040815 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MICHAEL J MCGOEY CPA INC
639 EAST OCEAN AVE
SUITE 101
BOYNTON BEACH, FL 33435 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D P () Delete
Name: LOGRASSO, ANTONINA
Address: 6436 BELLA CIRCLE
City-St-Zip: BOYNTON BEACH, FL 33437

Title: D S () Delete
Name: LOGRASSO, VINCENZO
Address: 9737 CAMPI DRIVE
City-St-Zip: LAKE WORTH, FL 33467

Title: D VP () Delete
Name: LYCZKOWSLI, MARCIN
Address: 5869 W ATLANTIC AVE A3
City-St-Zip: DELRAY BEACH, FL 33484 84

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: VINCENZO LOGRASSO

D

04/28/2009

Electronic Signature of Signing Officer or Director

Date