2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000040410

Entity Name: ANTONIO'S, INC.

FILED Jul 25, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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640 EAST OCEAN AVE STE 11 640 EAST OCEAN AVE

BOYNTON BEACH, FL 33435 SUITE 11

BOYNTON BEACH, FL 33435

Current Mailing Address: New Mailing Address:

640 EAST OCEAN AVE STE 11 640 EAST OCEAN AVE

BOYNTON BEACH, FL 33435 SUITE 11

BOYNTON BEACH, FL 33435

FEI Number: 01-0894997 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CALICCHIO, ANTONIO DISPOTO, JOHN C 640 EAST OCEAN AVE STE 11 640 EAST OCEAN AVE

BOYNTON BEACH, FL 33435 US SUITE 11
BOYNTON BEACH, FL 33435 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both,

SIGNATURE: JOHN C. DISPOTO 07/25/2008

JOHN C. DISPOTO 07/25/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

in the State of Florida.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: P (X) Change () Addition

Name:CALICCHO, ANTONIOName:DISPOTO, JOHN CAddress:640 EAST OCEAN AVE STE 11Address:640 EAST OCEAN AVE SUITE 11

City-St-Zip: BOYNTON BEACH, FL 33435 City-St-Zip: BOYNTON BEACH, FL 33435

 $\label{eq:Title:S} {\sf Title:} \qquad \qquad {\sf S} \qquad \qquad (\) \ {\sf Change} \ \ ({\sf X}) \ {\sf Addition}$

 Name:
 Name:
 CALICCHIO, ANTHONY

 Address:
 Address:
 640 EAST OCEAN AVE SUITE 11

 City-St-Zip:
 City-St-Zip:
 BOYNTON BEACH, FL 33435

Title: () Delete Title: T () Change (X) Addition

 Name:
 Name:
 ROSENTHAL, HOWARD

 Address:
 Address:
 640 EAST OCEAN AVE SUITE 11

 City-St-Zip:
 City-St-Zip:
 BOYNTON BEACH, FL 33435

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: JOHN C. DISPOTO P 07/25/2008