

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000126459

FILED
Apr 30, 2009
Secretary of State

Entity Name: PALACE ITALIAN RESTAURANT NORTH INC

Current Principal Place of Business:

6212 US HIGHWAY 98 NORTH
LAKE LAND, FL 33809

New Principal Place of Business:

Current Mailing Address:

6212 US HIGHWAY 98 NORTH
LAKE LAND, FL 33809

New Mailing Address:

FEI Number: 26-1475542

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ACCOUNTING TAX & FINANCIAL SERVICES INC
510 MARCUM ROAD
LAKE LAND, FL 33809 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: P () Delete
Name: MORIELLO, PATRIZIA S
Address: 5760 HIGH RIDGE LOOP
City-St-Zip: LAKE LAND, FL 33813 US

Title: VP () Delete
Name: LANUTO, GIORDANO
Address: 2346 COUPLES DRIVE
City-St-Zip: LAKE LAND, FL 33813

Title: S () Delete
Name: ESPOSITO, MICHELE C
Address: 5760 HIGH RIDGE LOOP
City-St-Zip: LAKE LAND, FL 3313

Title: T () Delete
Name: MORIELLO, GIUSEPPE S
Address: P.O. BOX 1273
City-St-Zip: AUBURNDALE, FL 33823

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:

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: GIORDANO LANUTO

VP

04/30/2009

Electronic Signature of Signing Officer or Director

Date