2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000063383

Entity Name: CO. TI. RESTAURANTS USA, INC.

FILED Jan 30, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
	COLONIAL DR. O, FL 32804	US			
Current Mailing Address:			New Mailing Address:		
	COLONIAL DR. O, FL 32804	US			
FEI Number	r: 59-3211277	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:		
1325 W. C	ETTI, GIULIAN COLONIAL DR. D, FL 32804	us			
	e named entity s e of Florida.	submits this statement for the	purpose of changing its registere	ed office or registered agent, or both,	
SIGNATU	RE:				
	Electror	ic Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financing	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PSTD () CORTELLETTI, 1325 W. COLO ORLANDO, FL	NIAL DR.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () CORTELLETTI, 1325 W. COLO ORLANDO, FL	NIAL DR.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () CORTELLETTI, 1325 W. COLO ORLANDO, FL	NIAL DR.	Title: Name: Address: Citv-St-Zip:	() Change () Addition	

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: MICHAEL CORTELLETTI D 01/30/2009