

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P94000076521

FILED
Apr 30, 2003
Secretary of State

Entity Name: SALERNO'S ITALIAN RESTAURANT, INC.

Current Principal Place of Business:

499 E OAKLAND PARK BLVD
OAKLAND PARK, FL 33334 US

New Principal Place of Business:

301 W OAKLAND PARK BLVD
FT.LAUDERDALE, FL 33334 US

Current Mailing Address:

499 E OAKLAND PARK BLVD
OAKLAND PARK, FL 33334 US

New Mailing Address:

301 W OAKLAND PARK BLVD
FT.LAUDERDALE, FL 33334 US

FEI Number: 65-0528545

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TEMKIN, RONALD E
616 ATLANTIC SHORE BLVD #A
HALLANDALE, FL 33009 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: DP () Delete
Name: SALERNO, CAROL
Address: 5901 NE 15TH AVE
City-St-Zip: FT LAUDERDALE, FL

Title: DST () Delete
Name: SALERNO, NICHOLE
Address: 515 SW 183RD WAY
City-St-Zip: PEMBROKE PINES, FL 33020

Title: DV () Delete
Name: SRBOVAN, VALENTINE
Address: 515 SW 183RD WAY
City-St-Zip: PEMBROKE PINES, FL 33020

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 for the exemption stated in Section 119.07(3)(i), 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: CAROL SALRENO

DP

04/30/2003

Electronic Signature of Signing Officer or Director

Date