2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000070873

FILED Jan 24, 2009 Secretary of State

Entity Name: GINO'S NEWYORK STYLE PIZZERIA RESTAURANT, INC.

New Principal Place of Business: Current Principal Place of Business: 35977 US 19 PALM HARBOR, FL 34683 **Current Mailing Address: New Mailing Address:** 35977 US 19 PALM HARBOR, FL 34683 FEI Number: 59-3334307 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: BONETTI, ARLENE 35977 US 19 PALM HARBOR, FL 34683 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PST () Delete Title: () Change () Addition BONETTI, ARLENE Name: Name: 3382 HICKORYWOOD WAY Address: Address: City-St-Zip: TARPON SPRINGS, FL 34689 City-St-Zip: () Delete Title: DV Title: () Change () Addition Name: BONETTI, BLAISE Name: 3382 HICKORYWOOD WAY Address: Address: TARPON SPRINGS, FL 34689 City-St-Zip: 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: ARLENE BONETTI PST 01/24/2009