FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT **1996**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000072623

1. Corporation Name

JOJOHNI RISTORANTE, INC.

Principal Place of Business: 3717 CYPRESS ST. TAMPA, FL 33607

Mailing Address:

3. Date Incorporated or Qualified: SEPT. 20, 1995

3a. Date of Last Report: FIRST

4. FEI Number: 59-3345003 — [ ] Applied For [ ] Not Applicable

5. Certificate of Status Desired [X] — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution [ ] — $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes [ ] Yes [X] No

2. Principal Place of Business
21: 3717 CYPRESS ST.
22 Suite, Apt. #, etc.:
23 City & State: TAMPA, FL
24 Zip: 33607
25 Country:

2a. Mailing Address
26:
27 Suite, Apt. #, etc.:
28 City & State:
29 Zip:
30 Country:

9. Name and Address of Current Registered Agent

JOSEPH A. CANNATA
910 E. LAMBRIGHT ST.
TAMPA, FL 33604

10. Name and Address of New Registered Agent

81 Name: SANDRA VIGGIANO
82 Street Address (P.O. Box Number is Not Acceptable): 3717 CYPRESS ST.
83
84 City: TAMPA FL
85 Zip Code: 33607

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *Sandra Viggiano* — DATE: 5-10-96

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: P NAME / STREET ADDRESS / CITY-ST-ZIP	JOSEPH A. CANNATA 910 E. LAMBRIGHT ST. [X] DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	[ ] Change [ ] Addition
TITLE: S NAME / STREET ADDRESS / CITY-ST-ZIP	MARI-THERESA SPANOLA 910 E. LAMBRIGHT ST. [X] DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	[ ] Change [ ] Addition
TITLE: VP NAME / STREET ADDRESS / CITY-ST-ZIP	SANDRA VIGGIANO 13306 ARENA PL. [ ] DELETE	3.1 TITLE: P / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	SANDRA VIGGIANO 13306 ARENA PLACE TAMPA, FL 33612 [X] Change [ ] Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	[ ] DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	[ ] Change [ ] Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	[ ] DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	[ ] Change [ ] Addition 400001826094 -05/17/96--01017--002 ***233.75
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	[ ] DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	[ ] Change [ ] Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Sandra Viggiano, Pres.*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 5-10-96 — Daytime Phone #: 813-879-3103

CR2E034 (12/95)