

**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**

2007 NOV 13 PM 2:12

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # P95000082860**

1. Entity Name  
**FLYERS WINGS & GRILL, INC.**

Principal Place of Business: 5621 WEST COLONIAL DRIVE ORLANDO, FL 32808-7613  
Mailing Address: 5621 WEST COLONIAL DRIVE ORLANDO, FL 32808-7613

2. Principal Place of Business - No P.O. Box #  
3. Mailing Address

Suite, Apt. #, etc. City & State Zip Country

4. FEI Number: 59-3340661 Applied For:  Not Applicable

5. Certificate of Status Desired:  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent:  
**MATTIOLI, MILLIE**  
5621 WEST COLONIAL DRIVE  
ORLANDO, FL 32808-7613

7. Name and Address of New Registered Agent:

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: *Frank Mattioli* DATE: 04-26-07

9. Election Campaign Financing Trust Fund Contribution:  \$5.00 May Be Added to Fees

**FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$590.00**

10. OFFICERS AND DIRECTORS <input type="checkbox"/> Delete		11. ADDITION/CHANGES TO OFFICERS AND DIRECTORS IN 11 <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	PV MATTIOLI, MILLIE 5621 WEST COLONIAL DRIVE ORLANDO, FL 328087813	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	TS MATTIOLI, FRANK 5621 WEST COLONIAL DRIVE ORLANDO, FL 328087613	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	500112515369 11/21/07--01053--005 **753.00
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 110, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or in an attachment with an address, with all other like empowered.

SIGNATURE: *Frank Mattioli* DATE: 04-26-07

**REINSTATEMENT** *D?*

04232007 Chg-P CR2E034 (12/06)

Applied For:  Not Applicable

8.75 Additional Fee Required



*11/16 a*