FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business

NAME

STREET ADDRESS

CHY-ST-7IP



ELORIDA DEPARTMENT DE STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000059993 (1)

IRPINIA KITCHENS OF BOCA RATON, INC.

Mailing Address

FILED Apr 16 1998 8:00am Secretary of State



7600 NORTH FEDERAL HIGHWAY, SUITE 3 7600 NORTH FEDERAL HIGHWAY, SUITE 3 **BOCA RATON FL 33487 BOCA RATON FL 33487** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/17/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 65-068 1955 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zio Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 X Yes Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **AMERILAWYER CHARTERED** 81 Name 343 ALMERIA AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) CORAL GABLES FL 33134 City 65 Zip Code 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 Signature, typied or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1.1 TITLE ☐ Change ☐ Addition ROSSI, NICOLA NAME 1.2 NAME 7600 NORTH FEDERAL HIGHWAY, SUITE 3 STREET ADDRESS 1.3 STREET ADDRESS **BOCA RATON FL 33487** CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE DELETE 21 TITLE Change Addition MARCANTONIO, GIUSSEPPE NAME 22 NAME 7600 NORTH FEDERAL HIGHWAY, SUITE 3 STREET ADDRESS 2.3 STREET ADDRESS **BOCA RATON FL 33487** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Addition MARCANTONIO, MARCELLO NAME 3.2 NAME 7600 NORTH FEDERAL HIGHWAY, SUITE 3 STREET ADDRESS 3.3 STREET ADDRESS **BOCA RATON FL 33487** CITY-ST-71P 3.4. CITY+ST-ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change ___ Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE

14. I hereby certify that the information supplied with 1/1 filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental ainual 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 of 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

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

建树脂染料 SIGNATURE:

Change

Addition