

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000106389

1. Entity Name

EMILIO'S ITALIAN RESTAURANT, INC.

FILED

Jan 19, 2001 8:00 am  
Secretary of State

01-19-2001 90034 024 \*\*\*150.00

0621550

Principal Place of Business Mailing Address  
11130 E OAKLAND PARK BLVD 11130 E OAKLAND PARK BLVD  
SUNRISE FL 33351 SUNRISE FL 33351

C0005827

11130 W OAKLAND PARK BLVD 11130 W OAKLAND PARK BLVD

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State SUNRISE FL		City & State SUNRISE FL	
Zip 33351	Country BROWARD	Zip 33351	Country BROWARD



DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0801081		Applied For
		Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
CORSO, ANTHONY E 9910 S. GRAND DUNE CIRCLE TAMARAC FL 33321		Name ANTHONY CORSO Street Address (P.O. Box Number is Not Acceptable) 9910 S. GRAND DUNE CIRCLE City TAMARAC FL Zip Code 33321	

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.

SIGNATURE ANTHONY CORSO Anthony Corso 1/8/01  
(NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/>	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/P CORSO, ANTHONY E 11130 E OAKLAND PARK BLVD SUNRISE FL 33351 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V CORSO, ANTHONY 9910 S GRAND DUNE CIRCLE TAMARAC FL 33321 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. I hereby certify that the information supplied with this 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Anthony Corso V.P. 1/8/01  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)