

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000015293

FILED
Apr 22, 2009
Secretary of State

Entity Name: DAVINCI'S RESTAURANT OF MARCO ISLAND, INC.

Current Principal Place of Business:

599 S. COLLIER BLVD.
MARCO ISLAND, FL 34145

New Principal Place of Business:

599 S. COLLIER BLVD.
215
MARCO ISLAND, FL 34145

Current Mailing Address:

599 S. COLLIER BLVD.
MARCO ISLAND, FL 34145

New Mailing Address:

599 S. COLLIER BLVD.
215
MARCO ISLAND, FL 34145

FEI Number: 59-3519411

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SABIO, VINCENT A
817 BENTWOOD DR
NAPLES, FL 34108 US

Name and Address of New Registered Agent:

SABIO, VINCENT A
237 MONTEREY DRIVE
NAPLES, FL 341083411 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: VINCENT SABIO

04/22/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: SALVATORE, CARVELLI
Address: 566 S. COLLIER BLVD.
City-St-Zip: MARCO ISLAND, FL 34145

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change () Addition
Name: CARVELLI, SALVATORE
Address: 599 S. COLLIER BLVD.
City-St-Zip: MARCO ISLAND, FL 34145

Title: VP () Change (X) Addition
Name: CARVELLI, LUIGI
Address: 599 S COLLIER BLVD
City-St-Zip: MARCO ISLAND, FL 34145

Title: SECT () Change (X) Addition
Name: SERRAVALLE, ADAMO
Address: 599 S COLLIER BLVD
City-St-Zip: MARCO ISLAND, FL 34145

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: SALVATORE CARVELLI

PRES

04/22/2009

Electronic Signature of Signing Officer or Director

Date