2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000030510

Entity Name: DOLCE VITA RESTAURANT, INC.

2430 PERIWINKLE WAY SUITE B

SANIBEL ISLAND, FL 33957

Address:

City-St-Zip:

FILED Apr 09, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	IWINKLE WAY ISLAND, FL 3				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
P.O. BOX SANIBEL I	716 ISLAND, FL 3	3957			
FEI Number	: 65-0909090	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and	Address of (Current Registered Agent	:: Name and Address o	f New Registered Agent:	
SUITE 8	, JOHN IWINKLE WAY ISLAND, FL 3				
	e named entity e of Florida.	submits this statement for t	the purpose of changing its registered	d office or registered agent, or both,	
SIGNATU	RE:				
	Electro	nic Signature of Registered	Agent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	ARMENIA, JOH	IKLE WAY, SUITE B	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	VSD () Delete DREA	Title: Name:	() Change () Addition	

Address:

City-St-Zip:

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: JOHN ARMENIA PD 04/09/2009