2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000051019

Entity Name: FAV'S ITALIAN CUCINA, INC.

FILED Apr 06, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
	STREET WES TON, FL 34207			
Current Mailing Address:			New Mailing Addres	s:
	STREET WES TON, FL 34207			
FEI Numbei	r: 65-0922341	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of C	urrent Registered Agent:	Name and Address of	of New Registered Agent:
416 BRYN BRADEN The above	LI, MICHAEL N MAWR ISLAN TON, FL 34207 e named entity sele of Florida.	US	ourpose of changing its registere	d office or registered agent, or both,
SIGNATU	IRE:			
		ic Signature of Registered Ag	ent	Date
Election Ca	ampaign Financing	Trust Fund Contribution ().		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	PSTD () FAVASULI, MIC 416 BRYN MAV BRADENTON, F	VR ISLAND	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	LAMONT, WILS 416 BRYMAWR	ISLAND	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address:	WILSON, MARI 416 BRYN MAV	Delete E	Title: Name:	() Change () Addition
City-St-Zip:	BRADENTON, F		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: MARIA FAVASULI S 04/06/2009