

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.  
\*AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

DOCUMENT # S59972 (7)

1. Corporation Name

AMALFI'S ITALIAN RESTAURANT INC.

Principal Place of Business

Mailing Address

6149 WESTWOOD BLVD.  
ORLANDO FL 32821-8083

6149 WESTWOOD BLVD.  
ORLANDO FL 32821-8083

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

3a. Date of Last Report

06/12/1991

04/24/1996

4. FEI Number

Applied For

59-3068398

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year intangible  
Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25 29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

NAVARRA, ANTONIO  
6149 WESTWOOD BLVD.  
ORLANDO FL 32819

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating.)

DATE

12. OFFICERS AND DIRECTORS

TITLE VD  
NAME NAVARRA, ANTONIO  
STREET ADDRESS 10000 N FULTON CT.  
CITY-ST-ZIP ORLANDO FL ☒ DELETE

TITLE PD  
NAME NAVARRA, JOSEFINE  
STREET ADDRESS 10000 N FULTON CT.  
CITY-ST-ZIP ORLANDO FL ☒ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PRESIDENT ☒ Change ☐ Addition  
1.2 NAME NAVARRA, ANTONIO  
1.3 STREET ADDRESS 10000 N FULTON CT  
1.4 CITY-ST-ZIP ORLANDO, FL 32836

2.1 TITLE SECRETARY ☒ Change ☐ Addition  
2.2 NAME NAVARRA, JOSEFINE  
2.3 STREET ADDRESS 10000 N FULTON CT  
2.4 CITY-ST-ZIP ORLANDO, FL 32836

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

CR2E034 (4/97)

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AMALFI'S ITALIAN RESTAURANT, INC.  
6149 Westwood Blvd.  
Orlando, FL 32819  
EIN 59-3068398

August 13, 1997

Division of Corporations  
Annual Reports Section  
P.O. Box 1500  
Tallahassee, FL 32302-1500

Dear sirs:

Please find enclosed a payment of \$165.00  
for the 1997 Annual Report of Amalfi's Italian  
Restaurant, Inc.

Since we never received the annual report  
until now, we were instructed by your  
department to send only the normal fee of  
\$165.00, which we would of paid on time  
otherwise.

Thank you for your consideration.

Sincerely,

*Antonio Navarro*

Mr. Antonio Navarro  
President

eg

Enclosure