

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S64027

FILED
Mar 31, 2008
Secretary of State

Entity Name: BIG ANTHONY'S RESTAURANT & PIZZA, INC.

Current Principal Place of Business:

1142 UNIVERSITY DR.
CORAL SPRINGS, FL 33071

New Principal Place of Business:

Current Mailing Address:

1142 UNIVERSITY DR.
CORAL SPRINGS, FL 33041

New Mailing Address:

FEI Number: 65-0269566

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEFALCO, GUIDO
1142 UNIVERSITY DR.
CORAL SPRINGS, FL 33065 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DEFALCO, GUIDO
Address: 1142 UNIVERSITY DR
City-St-Zip: CORAL SPRINGS, FL 33065

Title: VP () Delete
Name: IACOPELLI, ANNAMARIE
Address: 1142 UNIVERSITY DR
City-St-Zip: CORAL SPRINGS, FL 33065

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: VANORE, ANNAMARIE
Address: 1142 UNIVERSITY DR
City-St-Zip: CORAL SPRINGS, FL 33065

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: ANNA MARIE VANORE

VP

03/31/2008

Electronic Signature of Signing Officer or Director

Date