

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# S97126

**Entity Name:** PASTA FAIR OF BELLEVIEW, INC.

**FILED**  
**Mar 26, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

10401 S. US HWY 441  
BELLEVIEW, FL 34420 US

**New Principal Place of Business:**

**Current Mailing Address:**

10401 S. US HWY 441  
BELLEVIEW, FL 34420 US

**New Mailing Address:**

FEI Number: 59-3103884      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

FUNK, KATHY  
10401 S. US HWY 441  
BELLEVIEW, FL 34420 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

**OFFICERS AND DIRECTORS:**

Title: PS  
Name: FUNK, KATHRYN M  
Address: 10877 SE 45TH AVENUE  
City-St-Zip: BELLEVIEW, FL 34420

I hereby 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 all other like empowered.

SIGNATURE: KATHRYN FUNK

Electronic Signature of Signing Officer or Director

P

03/26/2012

Date