FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

A. FILED
FILED

95 MAY 11 AM 10:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **V21556** **(8)**

1. Corporate Name
ITALKITCHEN, INC.

Principal Place of Business
2151 NW 72 AVE
2ND FLOOR
MIAMI FL 33122
US

Mailing Address
11549 SW 109 RD
UNIT B
MIAMI FL 33176
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/16/1992
3a. Date of Last Report: 05/23/1994

2. Principal Place of Business
21 3132 NW 72 Ave
22 Suite Apt # or
23 City & State: Miami, FL
24 Zip: 33122 25 Country: USA

2a. Mailing Address
26 3132 NW 72 Ave
27 Suite Apt # or
28 City & State: Miami, FL
29 Zip: 33122 30 Country: USA

4. FEI Number: 65-0391851 — Applied For / Not Applicable

5. Certificate of Status Desired [ ] — $8.75 Additional Fee Required

6. Electronic Filing Fee Contribution [ ] — $5.00 May Be Added to Fees

8. The corporation has liability for intangible tax under S. 199.032, Florida Statutes: [ ] Yes [ ] No

9. Name and Address of Current Registered Agent
ALFONSO, STELLA PLATON
2401 N.W. 93RD AVENUE
MIAMI FL 33172

10. Name and Address of New Registered Agent
81 Name: Alfonso, Stella Platon
82 Street Address (P.O. Box Number is Not Acceptable): 3132 NW 72 Ave
83
84 City: Miami FL 85 Zip: 33122

11. Pursuant to the provisions of Section 607.0505, Florida Statutes, the above named corporation submits the statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. The 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

12. ADDITIONAL OFFICERS AND DIRECTORS
D
PLATON, ALFONSO S
11549 B NW 109 RD
MIAMI FL

13. ADDITIONAL OFFICERS AND DIRECTORS TO BE ADDED, CHANGED OR DELETED
[ ] Change [ ] Add
D
Platon, Alfonso S
3132 NW 72 Ave
Miami FL 33122

14. I hereby certify that the information supplied with this report is accurate and that this corporation is currently qualified to transact business in Florida. I further certify that the information indicated on the preprinted or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. That an officer or director of the corporation or the agent of the corporation shall be available to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 9 or Block 10 as the registered agent or an officer or director with an address.

SIGNATURE: Stella Alfonso 5/4/95 593-0893
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Telephone #

0193906 CP