## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # V24329

1. Entity Name CEASAR'S LITTLE ITALY, INC.



FILED
Jan 16, 2008 08:00 A
Secretary of State

Principal Place of Business

836 INDIANTOWN RD JUPITER, FL 33458 Mailing Address

140 BEACON LN JUPITER, FL 33469



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01092008 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0349855 Applied For
Not Applicable

5. Certificate of Status Desired S8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PARRISH, BRUCE W., JR. 105 S NARCISSUS AVE SUITE 701 WEST PALM BEACH, FL. 33401 DO NOT WRITE IN THIS SPACE

<ol><li>The above named entity submits this statement for the purpose of ct the obligations of registered agent.</li></ol>	nanging its registered office or registered agent, or b	oth, in the St	ate of Florida.	I am familiar with, a	and accept
, in obsigations of registered agent.		,	•		
SIGNATURE					•
Signature, typed or printed name of registered agent and title if applicable,	(NOTE, Registered Agent signature required when reinstating)		10000000	Manager 1	

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00  Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees 01/17/08-80023-016 150.00

10. OFFICERS AND DIRECTORS TITLE NAME PALAZZOLO, CESARE STREET ADDRESS 140 BEACON LANE CITY-ST-ZIP JUPITER, FL 33469 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITI F NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/14/05.

222-9460 Dayline Prone #