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FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION: ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

OCHMENT# VE

1. Corporation Name						
STELLA'S RISTORANTE AND PIZZERIA, INC.						
OTECET					I SEAM ANGAN ANGAN ANGAN MANG MENGENDIN ANGAN ANGAN ANGAN A	AN AIRIS EI BH BIRN 1881
Principal Place	e of Business	Mailing Address				Ett Brøtt brøtt erøst tobt
5275 BABCOCK ST. 5275 BABCOCK ST.						
UNIT B-4 UNIT B-4					DO MOT MODIFE IN THIS SPA	0.5
PALM BAY FL 32905 PALM BAY FL 32905				DO NOT WRITE IN THIS SPACE		<u></u>
					3. Date Incorporated or Qualifed	
A 5 : 15	(B)	2a. Mailing Address			07/30/1992 4. FEI Number	Applied For
					19-3138940	Not Applicable
21 26 Suite, Apt. #, etc. Suite, Apt. #, etc.					<u> </u>	8.75 Additional
22					5. Certifcate of Status Desired	Fee Required
City & State City & State					6. Election Campaign Financing	5.00 May Be
23						Added to Fees
Zip				1	8. This corporation owes the current year Intangit	
24	25 29 30				Personal Property Tax.	res □No
-	9. Name and Address of Currer	nt Registered Agent			10. Name and Address of New Registered Ager	nt
			81	Name		
Traina, laura			82	Street Add	ress (P.O. Box Number is Not Acceptable)	
1349 ERLANG AVE.			L			
PALM BAY FL 32907			83			
			84	City	8	Zip Code
				1	FL	
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes	, the abov	e-named cor	poration submits this statement for the purpose of char ion's board of directors. I hereby accept the appointme	ging its registered
office or n agent. I a	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was aut itions of, Section 607.0505, Florid	nonzeu by la Statutes	ine corporat S.	ion's board of directors. Thereby accept the appointme	nt as registered
SIGNATURE					· · · · · · · · · · · · · · · · · · ·	•
O/O/I// O/(2	Signature, typed or printed name of registered age	<u> </u>		nt signature requir	red when reinstating) DATE	DECTORO IN 40
12.		√D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND D	Change Addition
TITLE	• • • • • • • • • • • • • • • • • • •		1.1 TITLE		,	Distance
NAME	, main, mane		1.2 NAME	T C.		
STREET ADDRESS	ALSO OUT THE CES TO THE		1	TADDRESS		
CITY-ST-ZIP			1.4 CITY-S 2.1 TITLE	ST-ZIP		Change
TITLE	VS	_				
NAME	ilama, Biolat		2.2 NAME			
STREET ADDRESS	-1349 ERLANG-AVE			TADDRESS -		
CITY-ST-ZIP	PALM BAY FL	DELETE	2.4 CITY-1	\$1-ZIP		Change
TITLE			3.2 NAME		. –	_
NAME				T ADDRESS		
STREET ADDRESS						
CITY-ST-ZIP			3.4. CITY-1	51-ZIP		Change
TITLE		<u></u>	4. 2 NAME		_	-
NAME				TADORESS		
STREET ADDRESS			4.4 CITY-S	ſ	•	
CITY-ST-ZIP TITLE			5.1 TITLE	71-2.11		Change
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREE	T ADDRESS		}
CITY-ST-ZIP			5.4 CITY-S	ST-ZIP		
TITLE		[] DELETE	6.1 TITLE			Change Addition
NAME			6.2 NAME			ļ
STREET ADDRESS			6.3 STREE	TADDRESS]

14. I 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS