

# **2008 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P03000032185

**FILED**  
**Mar 07, 2008**  
**Secretary of State**

**Entity Name:** IANNI'S CONCESSIONS, INCORPORATED

**Current Principal Place of Business:**

12105 BOYETTE RD STE 474  
RIVERVIEW, FL 33569

**New Principal Place of Business:**

11705 BOYETTE RD  
SUITE 474  
RIVERVIEW, FL 33569

**Current Mailing Address:**

12105 BOYETTE RD STE 474  
RIVERVIEW, FL 33569

**New Mailing Address:**

11705 BOYETTE RD  
SUITE 474  
RIVERVIEW, FL 33569

**FEI Number:** 90-0061037

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LAWSON, MONICA Z  
2403 STATE STREET  
TAMPA, FL 33509 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: MONICA LAWSON

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: IANNI, STEVEN  
Address: 12105 BOYETTE RD STE 474  
City-St-Zip: RIVERVIEW, FL 33569

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP (X) Change ( ) Addition  
Name: IANNI, STEVEN  
Address: 11705 BOYETTE RD STE 474  
City-St-Zip: RIVERVIEW, FL 33569

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: STEVEN IANNI

DP

03/07/2008

Electronic Signature of Signing Officer or Director

Date