

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

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1995 APR 28 PM 2: 21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DO NOT WRITE IN THIS SPACE.

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **672781** (2)

1. Corporation Name
DINO'S PIZZA NO. 301, INC.

Principal Place of Business Mailing Address
6346 LANTANA RD STE 74 LAKE WORTH FL 33463 US

3. Date Incorporated or Qualified **06/09/1980** 3a. Date of Last Report **04/21/1994**
4. FEI Number **59-2006047** Applied For Not Applicable
5. Certificate of Status Desired **\$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution **\$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 25 29 30

9. Name and Address of Current Registered Agent
**HORVATH, WILLIAM JOSEPH JR
6346 LANTANA RD
STE 74
LAKE WORTH FL 33463**

10. Name and Address of New Registered Agent
B1 Name
B2 Street Address (P.O. Box Number is Not Acceptable)
B3
B4 City **FL** B5 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such 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 _____ (NOTE: Registered Agent signature required when registering) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DS	1 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HORVATH, N. CAROLYN	1 2 NAME	
STREET ADDRESS	6346 LANTANA RD, #74	1 3 STREET ADDRESS	
CITY - ST - ZIP	LAKE WORTH FL	1 4 CITY - ST - ZIP	
TITLE	DP	2 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HORVATH, WILLIAM JOSEPH	2 2 NAME	
STREET ADDRESS	6346 LANTANA RD, #74	2 3 STREET ADDRESS	
CITY - ST - ZIP	LAKE WORTH FL	2 4 CITY - ST - ZIP	
TITLE	DVP	3 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HORVATH, ROBERT JOHN	3 2 NAME	
STREET ADDRESS	6346 LANTANA RD, #74	3 3 STREET ADDRESS	
CITY - ST - ZIP	LAKE WORTH FL	3 4 CITY - ST - ZIP	
TITLE	DT	4 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TRYLCH, TODD MICHAEL	4 2 NAME	
STREET ADDRESS	6346 LANTANA RD, #74	4 3 STREET ADDRESS	
CITY - ST - ZIP	LAKE WORTH FL	4 4 CITY - ST - ZIP	
TITLE		5 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5 2 NAME	
STREET ADDRESS		5 3 STREET ADDRESS	
CITY - ST - ZIP		5 4 CITY - ST - ZIP	
TITLE		6 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6 2 NAME	
STREET ADDRESS		6 3 STREET ADDRESS	
CITY - ST - ZIP		6 4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: **N. CAROLYN HORVATH** 4-17-95 407.732.8798
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR Date Telephone #