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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

(2)**DOCUMENT # 672781**

DINO'S PIZZA NO. 301, INC.						
Principal Place	of Business	Mailing Address		1 18610 BIAR (1880 FIUIS 1880) 1810	1101 01011 01011 01 0 11	BIDII DIDII DIDII IBBI
6346 LANTANA RD 6346 LANTANA		6346 LANTANA RD				
STE 74	. 5	STE 74				
LAKE WORTH FL 33463 US		LAKE WORTH FL 33463 US		3. Date Incorporated or Qualified	3a. Date of L	ast Report
•		•		06/09/1980	04/28	/1995
2. Principal Pla	ace of Business	2a. Mailing Address		4. FEI Number		Applied For
21		26		59-2006047	··	Not Applicable
Suite, Apt. #	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	1 1	3.75 Additional Fee Required
	City & State City & State			6. Election Campaign Financing \$5.00 May Be		
23		28		Trust Fund Contribution		Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for		
24	25	29	30	Florida Statutes 📈 Yes	i □No	
	9. Name and Address of Current	Registered Agent		10. Name and Address of New I	Registered Agen	ıt
			81 Name			
HORVATH, WILLIAM JOSEPH JR			82 Street Ad	dress (P.O. Box Number is Not Acceptable)		
6346 LANTANA RD			83			
STE 74	ADTU EL 99469					
DAVE M	ORTH FL 33463		84 City		FL 65	Zip Code
11. Pursuant t	to the provisions of Sections 607.0502	and 607.1508, Florida Statute	s, the above-named corp	oration submits this statement for the pu		its registered office
or registere	ed agent, or both, in the State of Florida th, and accept the obligations of, Section	 Such change was authorize 	ed by the corporation's bo	ard of directors. I hereby accept the app	ointment as regis	tered agent. I am
CICNIATURE						
<u></u>	Signature, typed or printed name of registered agent ar	nd title if applicable (NO:	E: Registered Agent signature requi		DATE	
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFF		
TITLE	DS CAROLINA	☐ DELETE	1, 1 TITLE		□ Ch	ange Addition
NAMÉ	HORVATH, N. CAROLYN		1.2 NAME			
STREET ADDRESS	6346 LANTANA RD, #74 LAKE WORTH FL		1.3 STREET ADDRESS			
CITY - ST - ZIP	DP LAKE WORTH FL	☐ DELETE	1.4 CITY - ST - ZIP 2 1 TITLE		Ch	ange
NAME	HORVATH, WILLIAM JOSEPH		2 2 NAME			ange
STREET ADDRESS	6346 LANTANA RD, #74		2 3 STREET ADDRESS			
CITY-ST-ZIP	LAKE WORTH FL		2.4 CITY - ST - ZIP			
TITLE	DVP	☐ DELETE	3 1 TITLE		[Chi	ange 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	☐ DELETE	4. 1 TITLE		Cn.	ange 🔲 Addition
NAME	TRYLCH, TODD MICHAEL		4 2 NAME			
STREET ADDRESS	6346 LANTANA RD, #74		4.3 STREET ADDRESS			
CITY - ST - ZIP	LAKE WORTH FL	E Ariere	4.4 CITY- ST- ZIP			
TITLE		DELETE	5 1 TITLE		☐ Cha	ange
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY - ST - ZIP TITLE		DELETE	54 City-St-ZiP 6 1 Title		Cha	ange Addition
NAME		ي مدداد	62 NAME			ango E Addition
STREET ADDRESS			63 STREFT ADDRESS			
CITY-ST-7IP	·		6.4 CITY-ST-ZIP			

14. Ido 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 13 if changed, or on an attachment with an address. SIGNATURE: WILLIAM J HORY OTH JR. 3-19-96 407 969.7911
SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR HORY OTH JR. 3-19-96 400 Daylete Prone 2