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DOCUMENT # 672781 1. Entity Name DINO'S PIZZA NO. 301, INC.								Mar Sec		
Principal Place of Business 6346 LANTANA RD STE 74 LAKE WORTH FL 33463 US		63 ST L/	Mailing Address 6346 LANTANA RD STE 74 LAKE WORTH FL 33463 US							
2. Principal Place of Business Suite, Apt. #, etc. City & State			3. Mailing Address Suite, Apt. #, etc.							
								DC		
			City & State			4.	4. FEI Number 59			
Zip	Country		Zip	<u>–</u>	Cour	itry	5.	Certificate of Statu		
	6. Name and Address of Cu	ırrent Regi	stered Agent			Name	7.	Name and Addres		
HORVATH, WILLIAM JOSEPH JR 6346 LANTANA RD STE 74 LAKE WORTH FL 33463						ess (P.O	ss (P.O. Box Number is Not			
SIGNATURE A	med entity submits this statem	/	Wil	llean	5 J	ed office or reg	will	7R		
	ion is eligible to satisfy its Inta uirement and elects to do so.	ngible	-			IS \$150.00 will be \$550.0	00	10. Election Ca		

		DO NOT WRIT	E IN THIS	SPAC	E				
4 . F	El Number	59-2006047				plied For			
5. Certificate of Status Desired				\$8.75 Additional Fee Required					
7. N	lame and Ad	Idress of New Re	gistered						
				<u></u>					
Э. В	ox Number i	s Not Acceptable)						
						-			
			FI	L 2	ip Code				
lage	ent, or both,	in the State of Flo	rida.	_					
	TR		3-1		01				
en re	instating)		DATE						
	Trust	on Campaign Fine Fund Contribution	1.		Added	May Be to Fees			
AD	DITIONS/CH	IANGES TO OFFI	CERS AN						
				<u>.</u>	Change	Addition			
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					Change	☐ Addition			
<u>-</u>					 Change	Addition			

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

Make Check Payable to Department of State

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12.

TITLE -

NAME

TITLE

NAME STREET ADDRESS

TITLE

NAME STREET ADDRESS

TITLE

NAME

TITLE

NAME

TITLE

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE:

(See criteria on back)

HORVATH, N. CAROLYN

6346 LANTANA RD, #74

6346 LANTANA RD, #74

HORVATH, ROBERT JOHN

HORVATH, WILLIAM JOHN

6346 LANTANA RD, #74

6346 LANTANA RD, #74

HORVATH, WILLIAM JOSEPH

LAKE WORTH FL

LAKE WORTH FL

LAKE WORTH FL

LAKE WORTH FL

11.

TITLE

NAME

TITLE NAME

TITLE

NAME

TITLE

NAME

TITLE

NAME

TITLE NAME STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE AND TYPED OF BUTINED NAME OF SIGNING OFFICER OR DIRECTOR

OFFICERS AND DIRECTORS

3-1-01 561 969-7911 Date Daytime Phone #

Change

☐ Addition

CR2E034 (10/00)