## 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

· 1	1996 DIVISION OF CORPORATIONS			TIONS				
DOCUM	MENT # <b>J3032</b>	(6)						
I. Corporation I	Name NSE PIZZA & SUBS, INC.							
OND DI								
rincipal Place o	of Business	Mailing Address				191 IIII UIDII 1911II	UPBA UPBA	81811 63811 1631
3351 S. R. 58 PALM HARBO		3351 S. R. 584 PALM HARBOR FL 34	1684					
					3. Date Incorporated or Qualified 08/27/1986		of Last R <b>/01/19</b>	•
Principal Plac	ce of Business	2a. Mailing Address			4. FEI Number NOT APPLICABLE		L	Applied For Not Applicable
Suite, Apt. #,	, etc.	Suite, Apt. #, etc.			Certificate of Status Desired			Additional
		27						Required
City & State		City & State			6. Election Campaign Financing Trust Fund Contribution			May Be ed to Fees
Zip	Country	Zip	Cour	ntry	8. This corporation has liability for		under s	199.032,
	25	29	30		Florida Statutes Ye  10. Name and Address of New	es No Begistered A	cent	
	9. Name and Address of Curre	III negistered Agent		81 Name	10, Italio and Plate over 4. Itali			
ENGLISH, MARCUS R. 3351 S.R. 584				82 Street Addr	ess (P.O. Box Number is Not Acceptable)			
PALM HARBOR FL 34684				83				
			•	84 City		FL	85 Zi	ip Code
1. Pursuant to	the provisions of Sections 607.050	2 and 607.1508, Florida Statu	ites, the abo	ve-named corpor	ration submits this statement for the p	ournose of chan	nging its	registered office
or registere	d agent, or both, in the State of Flo n, and accept the obligations of, Se	rida. Such chance was authori	ized by the c	orporation's boai	rd of directors. I hereby accept the ap	opointment as n	egistered	u agent. i am
SIGNATURE						DATE		
2.	Signature, typed or printed name of registered age OFFICERS A	int and title if applicable. (N ND DIRECTORS	NOTE: Registered	Agent signature require	ADDITIONS/CHANGES TO O		DIRECTO	ORS IN 12
ITLE	PD	☐ DELETE	1. 1 TI	TLE			] Change	Addition
AME	ENGLISH, MARCUS R.		1.2 NA	ME				
TREET ADDRESS	3351 S. R. 584		1.3 ST	REET ADDRESS				
ITY-ST-ZIP	PALM HARBOR FL	☐ DELETE		TY-ST-ZIP	······································	<del></del>	Change	☐ Addition
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IAME	ENGLISH, JEAN 3351 S. R. 584			REET ADDRESS				
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IAME TREET ADDRESS	3351 SR 584			TREET ADDRESS				
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ame			52 N	AME				
TREET ADDRESS				TREET ADDRESS				
CITY-ST-ZIP		☐ DELETE	5.4 C 6. 1 T	ITY-\$1-ZIP			Change	Addition
ITLE		□ Attric	6.2 N			_		<u> </u>
IAME Street address				TREET ADDRESS				
PITV. CT. 7IP			6.4 C	ITY-ST-ZIP				
14. I do hereb	y certify that the information supplied	d with this filing is voluntarily fu	urnished and	does not qualify	for the exemption stated in Section 1 ate and that my signature shall have to	19.07(3)(k), Flor the same legal (	ida Stati effect as	utes. I further if made under
certify that oath; that appears in	the information indicated on this ar I am an officer or director of the cor Block 12 or Block 13 if changed, c	inual report or supplemental ar poration or the receiver or trus ir on an attachment with an ac	nnual report i stee empowe idress.	is true and accur red to execute th	ate and that my signature shall have tall report as required by Chapter 607	he same lega! e , Florida Statute	effect as es; and the	if made hat my n

SIGNATURE: 1

CHATURE AND TYPED OR EINTED NAME OF SIGNING OFFICER OR DIRECTOR R. ENg/Sh 3-13-96 813-786-3136

R2E034 (12/95)