

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

APPROVE
AND
FILE

0216207

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

99 APR 30 AM 10:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M15878

1. Corporation Name
REY PIZZA CORP.

Principal Place of Business
2300 CORAL WAY #200 MIAMI FL 33145

Mailing Address
2300 CORAL WAY #200 MIAMI FL 33145

2. Principal Place of Business
21 **2300 CORAL WAY**
Suite, Apt #, etc.
22 **SUITE # 200**
City & State
23 **MIAMI FLORIDA**
Zip Country
24 **33145** 25 **U.S.**

2a. Mailing Address
26 **2300 CORAL WAY**
Suite, Apt #, etc.
27 **SUITE # 200**
City & State
28 **MIAMI FLORIDA**
Zip Country
29 **33145** 30 **US.**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **05/23/1985**
4. FEI Number **59-2530874** 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 owes the current year Intangible Personal Property Tax Yes No
10. Name and Address of New Registered Agent



9. Name and Address of Current Registered Agent

**FLORIDA ANNUAL REPORT SERVICES INC
2300 CORAL WAY #200 MIAMI FL 33145**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL 85 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. The only, except the appointment its registered agent I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE *[Signature]* **AMADA CANTERA LOPEZ, PRES**

4/7/99

12. OFFICERS AND DIRECTORS

TITLE	STD	[] DELETE
NAME	RODRIGUEZ, RAMON A.	
STREET ADDRESS	1042 SW 9 ST	
CITY-ST-ZIP	MIAMI FL	
TITLE	STD	[] DELETE
NAME	RODRIGUEZ, MARGARITA C.	
STREET ADDRESS	2908 WEST 3RD AVE.	
CITY-ST-ZIP	HALEAH FL	
TITLE		[] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	[] Change [] Add
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	[] Change [] Add
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	[] Change [] Add
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	[] Change [] Add
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	[] Change [] Add
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

600002859926--8
-05/03/99--0102--010
****150.00 ****150.00

[Signature]

4/7/99

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(g), 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, with all other like empowerer.

SIGNATURE: *[Signature]*
SIGNATURE AND TYPE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (1/98)