

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000014433

FILED
Mar 06, 2004
Secretary of State

Entity Name: PIZZA CONNECTION, INC.

Current Principal Place of Business:

1602-1 S FED HWY
BOYNTON BEACH, FL 33435 US

New Principal Place of Business:

1602 SOUTH FED HWY
BOYNTON BEACH, FL 33435 US

Current Mailing Address:

1602-1 S FED HWY
BOYNTON BEACH, FL 33435 US

New Mailing Address:

1145 SAN MICHELE WAY
PALM BEACH GARDENS, FL 33418 US

FEI Number: 65-0390573

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SETTICASI, STEVE
1602 SAVN FEDERAL HWY.
OCEAN RIDGE, FL 33435 US

Name and Address of New Registered Agent:

SETTICASI, STEVE
1145 SAN MICHELE WAY
PALM BEACH GARDENS, FL 33418 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

03/06/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: SETTICASI, STEPHANE
Address: 1602 SOUTH FEDERAL HWY.
City-St-Zip: HOBE SOUND, FL 33455

Title: DST () Delete
Name: SETTICASI, STEPHANIE
Address: 1602 SOUTH FEDERAL HWY.
City-St-Zip: BOYNTON BEACH, FL 33435

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: SETTICASI, STEPHANE
Address: 1602 SOUTH FEDERAL HWY.
City-St-Zip: BOYNTON BEACH, FL 33435

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEPHANIE SETTICASI

DST

03/06/2004

Electronic Signature of Signing Officer or Director

Date