

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000018070

FILED  
Apr 25, 2008  
Secretary of State

Entity Name: VILLA PIZZA SPECIALTIES, INC.

## Current Principal Place of Business:

8001 CIRRUS PARK  
TOWN CENTER HALL  
TAMPA, FL 33625

## New Principal Place of Business:

8001 CITRUS PARK  
TOWN CENTER HALL  
TAMPA, FL 33625

## Current Mailing Address:

25 WASHINGTON ST  
DEPT 1908  
MORRISTOWN, NJ 07960

## New Mailing Address:

FEI Number: 59-3504098      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: SCOTTO, BIAGIO  
Address: 25 WASHINGTON ST  
City-St-Zip: MORRISTOWN, NJ 07960

Title: S ( ) Delete  
Name: PUGLIESE, BIAGIO  
Address: 25 WASHINGTON ST  
City-St-Zip: MORRISTOWN, NJ 07960

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: SCOTTO, BIAGIO  
Address: 25 WASHINGTON ST  
City-St-Zip: MORRISTOWN, NJ 07960

Title: SEC (X) Change ( ) Addition  
Name: PUGLIESE, BIAGIO  
Address: 25 WASHINGTON ST  
City-St-Zip: MORRISTOWN, NJ 07960

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: BIAGIO SCOTTO

PRES

04/25/2008

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date