.FILE NOW: FILING FEE AFTER MAY 1 IS $550.00

PROFIT CORPORATION ANNUAL REPORT 1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K43266 (1)

1. Corporation Name

WESTCHESTER REY PIZZA, INC.

Principal Place of Business	Mailing Address
2300 CORAL WAY MIAMI FL 33145 US	2300 CORAL WAY MIAMI FL 33145-3511 US

3. Date Incorporated or Qualified **11/01/1988**		**3a.** Date of Last Report **05/01/1996**		

2. Principal Place of Business	2a. Mailing Address	4. FEI Number		
21 2300 CORAL WAY	26 2300 CORAL WAY	65-0089213	Applied For	
			Not Applicable	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired ☐	**$8.75** Additional Fee Required	
22 # 200	27 # 200			
City & State	City & State	6. Election Campaign Financing	**$5.00** May Be	
23 MIAMI FLORIDA	28 MIAMI FLORIDA	Trust Fund Contribution ☐	Added to Fees	
Zip	Country	Zip	Country	8. This corporation has liability for intangible tax under s. 199.032,
24 33145	25 US	29 33145	30 US	Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent		10. Name and Address of New 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. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE _____ AMADA CANTERA LOPEZ , PRES _____ 4/23/97

Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE **PD** ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition	
NAME **RODRIGUEZ, RAMON**	1.2 NAME		
STREET ADDRESS **3634 N.W. 13TH STREET**	1.3 STREET ADDRESS		
CITY-ST-ZIP **MIAMI FL**	1.4 CITY-ST-ZIP		
TITLE **STD** ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition	
NAME **RODRIGUEZ, MARGARITA**	2.2 NAME	**400002164054---1**	
STREET ADDRESS **3634 N.W. 13TH STREET**	2.3 STREET ADDRESS	**-05/02/97--01114--011**	
CITY-ST-ZIP **MIAMI FL**	2.4 CITY-ST-ZIP	******165.00 ****165.00**	
TITLE ☐ DELETE	3.1 TITLE	☐ Change ☐ Addition	
NAME	3.2 NAME		
STREET ADDRESS	3.3 STREET ADDRESS		
CITY-ST-ZIP	3.4 CITY-ST-ZIP		
TITLE ☐ DELETE	4.1 TITLE	☐ Change ☐ Addition	
NAME	4.2 NAME		
STREET ADDRESS	4.3 STREET ADDRESS		
CITY-ST-ZIP	4.4 CITY-ST-ZIP		
TITLE ☐ DELETE	5.1 TITLE	☐ Change ☐ Addition	
NAME	5.2 NAME		
STREET ADDRESS	5.3 STREET ADDRESS		
CITY-ST-ZIP	5.4 CITY-ST-ZIP		
TITLE ☐ DELETE	6.1 TITLE	☐ Change ☐ Addition	
NAME	6.2 NAME		
STREET ADDRESS	6.3 STREET ADDRESS		
CITY-ST-ZIP	6.4 CITY-ST-ZIP		

CR2E034 (9/96)

14. I do 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 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.

SIGNATURE: _____ 4/23/97