

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 469019

Entity Name: ABC PIZZA HOUSE, INC.**Current Principal Place of Business:**1242 W. HILLSBOROUGH AVE
TAMPA, FL 33603**Current Mailing Address:**1242 W. HILLSBOROUGH AVE
TAMPA, FL 33603**FEI Number:** 59-1578067**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**FOTOPOULOS, ANTHONY
1242 W. HILLSBOROUGH AVE.
TAMPA, FL 33603 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	PD
Name	FOTOPOULOS, ANTHONY
Address	10507 BERMUDA ISLE
City-State-Zip:	TAMPA FL 33647

Title	VP
Name	FOTOPOULOS, DEMETRIOS
Address	23434 ABERCORN LANE
City-State-Zip:	LAND O LAKES FL 34639

Title	S
Name	FOTOPOULOS, DIANE
Address	23434 ABERCORN LANE
City-State-Zip:	LAND O LAKES FL 34639

Title	MANAGER
Name	FOTOPOULOS, GEORGE
Address	23418 ABERCORN LANE
City-State-Zip:	LAND O LAKES FL 34639

Title	MANAGER
Name	FOTOPOULOS, VASILIOS
Address	1027 BLANN DRIVE
City-State-Zip:	TAMPA FL 33603

I hereby 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 all other like empowered.

SIGNATURE: DIANE FOTOPOULOS**SECRETARY****02/07/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date