

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 576001

**Entity Name:** ALFONSO'S PIZZERIA INC.

**Current Principal Place of Business:**

14942 N FLORIDA AVENUE  
TAMPA, FL 33613

**Current Mailing Address:**

14942 N FLORIDA AVENUE  
TAMPA, FL 33613

**FEI Number:** 59-1831765

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

OREFICE, ALFONSO  
14918 NORTHWOOD VILLAGE  
TAMPA, FL C, FL 33613 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 OREFICE, ALFONSO A.  
Address 14918 N. WOOD VILLAGE  
City-State-Zip: TAMPA FL

*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:** ALFONSO OREFICE

**OWNER**

**02/09/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date