2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F9300000594

Entity Name: PJ FOOD SERVICE, INC.

Current Principal Place of Business:

2002 PAPA JOHN'S BLVD LOUISVILLE, KY 40299-2367

Current Mailing Address:

2002 PAPA JOHN'S BLVD LOUISVILLE, KY 40299-2367

FEI Number: 61-1210265

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM 1200 S PINE ISLAND RD PLANTATION, FL 33324 US

Date

FILED

Certificate of Status Desired: No

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

Officer/Director Detail :

Title	DP	Title	TREASURER
Name	LYNCH, ROBERT M	Name	HOUSTON, CONNIE
Address	2002 PAPA JOHN'S BOULEVARD	Address	2002 PAPA JOHN'S BLVD
City-State-Zip:	LOUISVILLE KY 40299-2367	City-State-Zip:	LOUISVILLE KY 40299-2367
Title	V	Title	AS
Name	HUTCHINS, SHANE	Name	TATE JOHNSON, DEBRA
Address	2002 PAPA JOHN'S BLVD	Address	2002 PAPA JOHN'S BLVD
City-State-Zip:	LOUISVILLE KY 40299-2367	City-State-Zip:	LOUISVILLE KY 40299-2367
Title	ASST. SECRETARY	Title	ASSISTANT TREASURER
Title Name	ASST. SECRETARY MATTER, JOHN M	Title Name	ASSISTANT TREASURER PHENIX, CLAUDE
Name	MATTER, JOHN M	Name	PHENIX, CLAUDE
Name Address	MATTER, JOHN M 2002 PAPA JOHN'S BLVD	Name Address	PHENIX, CLAUDE 2002 PAPA JOHN'S BLVD
Name Address City-State-Zip:	MATTER, JOHN M 2002 PAPA JOHN'S BLVD LOUISVILLE KY 40299-2367	Name Address City-State-Zip:	PHENIX, CLAUDE 2002 PAPA JOHN'S BLVD LOUISVILLE KY 40299-2367
Name Address City-State-Zip: Title	MATTER, JOHN M 2002 PAPA JOHN'S BLVD LOUISVILLE KY 40299-2367 VP, SECRETARY	Name Address City-State-Zip: Title	PHENIX, CLAUDE 2002 PAPA JOHN'S BLVD LOUISVILLE KY 40299-2367 VP

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: DEBRA TATE JOHNSON

ASST. SECRETARY

04/30/2021

Electronic Signature of Signing Officer/Director Detail

Date