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Jan 24 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 435017 (9)

1. Corporation Name
VITO'S PIZZERIA RESTAURANT, INC.

Principal Place of Business
2580 NORTHWEST 64TH BOULEVARD
BOCA RATON FL 33496

Mailing Address
3013 YAMATO RD
STE B15
BOCA RATON FL 33434-5356
US



3. Date Incorporated or Qualified 10/10/1973
3a. Date of Last Report 02/23/1996

4. FEI Number 59-1498143
Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business
21 3013 Yamato Rd.

2a. Mailing Address

Suite, Apt. #, etc.
22 Ste B 15

Suite, Apt. #, etc.

City & State
23 Boca Raton, Fl.

City & State

Zip
24 33434

Country
25 USA

Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

OCCHIOGROSSO, VITO
2580 NORTHWEST 64TH BOULEVARD
BOCA RATON FL 33496

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)
3013 Yamato Rd Ste B15

83

84 City Boca Raton

FL

85 Zip Code 33434

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

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
NAME OCCHIOGROSSO, VITO
STREET ADDRESS 2580 NW 64 BLVD
CITY-ST-ZIP BOCA RATON FL

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS 3013 Yamato Rd. Ste B 15
1.4 CITY-ST-ZIP Boca Raton Fl. 33434

TITLE SD
NAME OCCHIOGROSSO, ANTOINETTE
STREET ADDRESS 2580 NW 64 BLVD
CITY-ST-ZIP BOCA RATON FL

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS 3013 Yamato Rd. Ste B 15
2.4 CITY-ST-ZIP Boca Raton Fl. 33434

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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, on an attachment with an address.

SIGNATURE: Vito Occhiogrosso Vito Occhiogrosso

1-1797 561-995-0800

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)