

4-11-97 B-4437C  
FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

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Apr 11 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **G30952** (7)

1. Corporation Name:  
**PIZZA EXPRESS, INC.**

Principal Place of Business  
**10304 NW 40 COURT  
CORAL SPRINGS FL 33065**

Mailing Address  
**10304 NW 40 COURT  
CORAL SPRINGS FL 33065-1542**



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>03/29/1983</b>	3a. Date of Last Report <b>08/05/1996</b>
21	Suite, Apt. #, etc.	25	Suite, Apt. #, etc.	4. FEI Number <b>59-2324536</b>	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
23	Zip	28	City & State	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
24	Country	29	Country	6. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
<b>DATTOMA, TERESA 10304 NW 40 COURT CORAL SPRINGS FL 33065</b>		81 Name	
		82 Street Address (P.O. Box Number is Not Acceptable)	
		83	
		84 City	<b>FL</b> 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

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	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>DATTOMA, ANGELA</b>	1.2 NAME	
STREET ADDRESS	<b>10304 N.W. 40TH CT.</b>	1.3 STREET ADDRESS	
CITY - ST - ZIP	<b>CORAL SPRINGS FL</b>	1.4 CITY - ST - ZIP	
TITLE	VD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>DATTOMA, DOMINICK</b>	2.2 NAME	
STREET ADDRESS	<b>10304 NW 40TH CT.</b>	2.3 STREET ADDRESS	
CITY - ST - ZIP	<b>CORAL SPRINGS FL</b>	2.4 CITY - ST - ZIP	
TITLE	SD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>DATTOMA, DOMINICK V.</b>	3.2 NAME	
STREET ADDRESS	<b>10304 N.W. 40TH COURT</b>	3.3 STREET ADDRESS	
CITY - ST - ZIP	<b>CORAL SPRINGS FL</b>	3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		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, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Dominick Dattoma**

**4-5-97**

Date

**954  
429-0004**

Daytime Phone #

CR2E034 (9/96)