

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 28 PM 4:23

DOCUMENT # G35194

(1)

1. Corporation Name

OCALA PIZZA, INC.

Principal Place of Business

Mailing Address

% GERALD P. NATIVO
2425 NE 18TH PL. #103
OCALA FL 34470
US

% GERALD P. NATIVO
2425 NE 18TH PL. #103
OCALA FL 34470
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

04/21/1983

3a. Date of Last Report

04/20/1994

4. FEI Number

61-1027355

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

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

NATIVO, GERALD P.
2425 N.E. 18TH PLACE UNIT #104
OCALA FL 32670

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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

(Check box if principal place of business of registered agent and file if appropriate)

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12.1 NAME	PD
12.2 STREET ADDRESS	NATIVO, GERALD P
12.3 CITY - ST - ZIP	2212 S.E. 14TH STREET OCALA, FL 00000
12.4 NAME	S
12.5 STREET ADDRESS	WIDES, STEVEN A.
12.6 CITY - ST - ZIP	900 WOODGLEN COURT LEXINGTON KY
12.7 NAME	
12.8 STREET ADDRESS	
12.9 CITY - ST - ZIP	
12.10 NAME	
12.11 STREET ADDRESS	
12.12 CITY - ST - ZIP	
12.13 NAME	
12.14 STREET ADDRESS	
12.15 CITY - ST - ZIP	

13.1 TITLE	☐ Change ☐ Addition
13.2 NAME	
13.3 STREET ADDRESS	
13.4 CITY - ST - ZIP	
13.5 TITLE	☐ Change ☐ Addition
13.6 NAME	
13.7 STREET ADDRESS	
13.8 CITY - ST - ZIP	
13.9 TITLE	☐ Change ☐ Addition
13.10 NAME	
13.11 STREET ADDRESS	
13.12 CITY - ST - ZIP	
13.13 TITLE	☐ Change ☐ Addition
13.14 NAME	
13.15 STREET ADDRESS	
13.16 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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:

Gerald P. Nativo GERALD NATIVO 2-9-95 (904) 867-1171
Date Signature