

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 02, 2007 8:00 am
Secretary of State

02-02-2007 90008 032 ***150.00

DOCUMENT # H32569

1. Entity Name

THE PIZZA-RANT, INC.



Principal Place of Business

13718 W. STATE ROAD 84
DAVIE FL 33325

Mailing Address

13718 W. STATE ROAD 84
DAVIE FL 33325



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0132616**

Applied For
Not Applicable

Zip

Country

Zip

Country

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

1st MOORE -CR2E034 (10/06)

6. Name and Address of Current Registered Agent

SILVESTRO, ANTONIO
11331 NW 5TH STREET
PLANTATION FL 33325

7. Name and Address of New Registered Agent

Name

Antonio Silvestro Jr.

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

13509 N. W. 8th Court.

City

Sunrise

FL

Zip Code

33325

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Antonio Silvestro Jr.

Signature, typed or printed name of registered agent and title (if applicable)

(NOTE: Registered Agent signature required when registering)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	SILVESTRO, ANTONIO	
STREET ADDRESS	11331 NW 5TH STREET	
CITY - ST - ZIP	PLANTATION FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	Antonio Silvestro Jr.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	13509 N. W. 8th Court	
STREET ADDRESS	Sunrise, FL 33325	
CITY - ST - ZIP	PRES.	
TITLE	Antonio Silvestro Sr.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	11331 NW 5th Street	
STREET ADDRESS	Plantation, FL 33325	
CITY - ST - ZIP	Sec.	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Antonio Silvestro Jr.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #