

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H48664

FILED  
Mar 23, 2012  
Secretary of State

Entity Name: RENNA'S PIZZA, INC.

**Current Principal Place of Business:**

6001-16 ARGYLE VILLAGE SQUARE  
JACKSONVILLE, FL 32244

**New Principal Place of Business:**

**Current Mailing Address:**

6001-16 ARGYLE VILLAGE SQUARE  
JACKSONVILLE, FL 32244

**New Mailing Address:**

FEI Number: 59-3131662

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ELEFANT, FRED  
1650 PRUDENTIAL DRIVE, STE 105  
JACKSONVILLE, FL 32207 US

**Name and Address of New Registered Agent:**

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

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: RENNA, JOSEPH  
Address: 6001-16 ARGYLE VILLG SQ  
City-St-Zip: JACKSONVILLE, FL

Title: S  
Name: RENNA, ROSETTE  
Address: 6001-16 ARGYLE FOREST BLVD  
City-St-Zip: JACKSONVILLE, FL

Title: V  
Name: RENNA, GUISEPPINA  
Address: 6001-16 ARGYLE VILLAGE SQUARE  
City-St-Zip: JACKSONVILLE, FL 32244

Title: V  
Name: RENNA, FRANCESCA  
Address: 6001-16 ARGYLE VILLAGE SQUARE  
City-St-Zip: JACKSONVILLE, FL 32244

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: JOSEPH RENNA

D

03/23/2012

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date