

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
Mar 27 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # J86230 (6)

1. Corporation Name
P & L PIZZA, INC.



Principal Place of Business 509 BROADWAY DAYTONA BEACH FL 32118	Mailing Address 509 BROADWAY DAYTONA BEACH FL 32118
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3. Date Incorporated or Qualified 07/31/1987	3a. Date of Last Report 02/19/1996
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2. Principal Place of Business 21 509 E. MTL SPEEDWAY Suite, Apt. #, etc.	2a. Mailing Address 25 509 E MTL SPEEDWAY Suite, Apt. #, etc.
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4. FEI Number 59-2847964	Applied For Not Applicable
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22 City & State 23 DAYTONA BEACH Zip Country	27 City & State 28 DAYTONA BEACH Zip Country
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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24 32118	25 VOLUSIA	29 32118	30 VOLUSIA
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6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
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9. Name and Address of Current Registered Agent			
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8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
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LEBOUKAS VASILIOS 509 BROADWAY AVE DAYTONA BEACH FL 32118	
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10. Name and Address of New Registered Agent	
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11. Pursuant to the provisions of Sections 607.01(2) 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.	
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SIGNATURE: <i>Vasilios Leboukas</i>	DATE: 2/15/97
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(NOTE: Registered Agent signature required when reinstating)	
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12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PST <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEBOUKAS, VASILIOS	1.2 NAME	
STREET ADDRESS	216 S. WILD OLIVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	DAYTONA BEACH FL	1.4 CITY-ST-ZIP	
TITLE	VD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEBOUKAS, VASILIOS	2.2 NAME	
STREET ADDRESS	216 S. WILD OLIVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	DAYTONA BEACH FL	2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	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	<input type="checkbox"/> DELETE	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	<input type="checkbox"/> DELETE	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 in an attachment with an address.	
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SIGNATURE: <i>Vasilios Leboukas</i>	DATE: 2/15/97	TIME: 25379/9
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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0613291

CR2E034 (9/96)