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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K73228

(4)

Mailing Address

GENNARO'S PIZZERIA, INC.

## FILED Apr 28 1997 8:00am Secretary of State



W JERRY D. FEOLA 7200 ORPINE DRIVE NORTH ST. PETERSBURG FL 33702		7200 ORPINE DRIVE NORT	% JERRY D. FEOLA 7200 ORPINE DRIVE NORTH ST. PETERSBURG FL 33702-5052		3. Date incorporated or Qualified 03/16/1989	d 3a. Date of Last Report 03/28/1996	
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	<u> </u>	Applied For
21		h1	26		59-2938971	<b>├</b> ─	Not Applicable
Suite, Apt.	#. etc.		Suite, Apt. #, etc.		33 2330371	60.75	Additional
22		27	<del></del>		5. Certificate of Status Desired		Required
City & Stat	6	City & State			6. Election Campaign Financing	\$5.0	0 May Be
23		28	28		Trust Fund Contribution		d to Fees
Zip	Country	Zφ	Country		8. This corporation has liability for in	ntangible tax under	s. 199.032.
24	25	29	30			Yes 🛛 No	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
FEOLA, JERRY D. 7200 ORPINE DR. NORTH			E	81 Name			
7200 ST. I		Ē	82 Street Address (P.O. Box Number is Not Acceptable)				
			ε	3			
			Ē	4 City		FL 85 Zip	o 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							
12,	Signature: typed or printed name of registered agent and filler it applicable. (NOTE Re OFFICERS AND DIRECTORS		13.	stered Agent signistaric required when reinstaturg)  DATE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTI		200 IN 10	
TITLE	PD	DELETE 1.1			ADDITIONS/CHANGES TO OFFICE	Change	
NAME	FEOLA, JERRY D.		1.2 NAM			L Onlinge	
STREET ADDRESS				FT ADDRESS			
CITY-ST-ZIP	ST. PETERSBURG FL		1.4 CITY				
TITLE			2.1 11111			Change	Addition
NAME I			22 NAM				
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP				-S1-7-P			
TITLE	DELETE		31 117(	· · · · · · · · · · · · · · · · · · ·		Addition	
NAME			3.2 NAM	E			
STREET ADDRESS			3.3 STHE	ET ADDRESS			
CITY-ST-ZIP			3.4. CITY	- ST - ZIP			
TITLE			4.1 TITLE			Change	Addition
NAME			4. 2 NAN	E			1
STREET ADDRESS			4.3 S1RE	ET ADDRESS			
CITY-ST-ZIP			4.4 CITY	- ST- 2IP			
TITLE			5.1 1/11/6			☐ Change	Addition
NAME			5.2 NAM				
STREET ADDRESS			5.3 STRE	ET ADDRESS			
CITY-ST-ZIP	****		5.4 CITY	·ST-ZIP			
TITLE			6 1 TITLE			Change	☐ Addition
NAME			6.2 NAM				
STREET ADDRESS			63 STRE	FT ADDRESS			
CITY-ST-ZIP			6.4 CHY	- ST - 7IP			

14. Ido 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 trusted 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.

VINCERALIK II SP (ADIOLINI ST)