2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L00000012828

Entity Name
 ENTERPRISE PIZZA, LLC



Principal Place of Business

910 RUCKER BLVD. ENTERPRISE, AL 36330 Mailing Address

1326 E LUMSDEN RD BRANDON, FL 33511

FILED Apr 06, 2004 8:00 am Secretary of State

04-06-2004 90129 046 ****50.00



01152004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number		Applied For
58-2578273		Not Applicable
5. Certificate of Status Desired	\$5.00	Additional

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

NORMAN, CHRISTOPHER H 315 S. HYDE PARK AVENUE TAMPA, FL 33606

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the purpose of chan lons of registered agent.	anging its registered office or registered agent, or both, in the State of Florida. I am familiar with	h, and accept
SIGNATURE_			•
	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating) DATE	
Fi	iling Fee is \$50.00 ue by May 1, 2004		•
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM TALAL A. KAZBOUR, TRUSTEE 1326 E LUMSDEN ROAD BRANDON, FL 33511		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME ~~ STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE	one dif y 1975 - F Allewing
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE	,
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS			

11. I 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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

ND TYPED OR DEINTED NAME OF SIGNING MANAGING MEMBER.

Talal Kuzbur

1/19/04

813-684-0622

Daytime Phone #