

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 17, 2002 8:00 am
Secretary of State

04-17-2002 90034 007 ****50.00

DOCUMENT # L01000008919

1. Entity Name

PIZZA UNLIMITED OF DAYTONA BEACH, LLC

Principal Place of Business

**103 NORTH LAKE DRIVE
 SUITE B
 ORMOND BEACH FL 32714**

Mailing Address

**103 NORTH LAKE DRIVE
 SUITE B
 ORMOND BEACH FL 32714**

2. Principal Place of Business

1808 W. Int'l Speedway Blvd.

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

Suite 501

City & State

Daytona Beach, FL 32114

City & State

4. FEI Number

59-3723123

Applied For

Not Applicable

Zip

Country

32114

USA

Zip

Country

5. Certificate of Status: Desired ☐

**\$5.00 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**JENNY, CHRISTIAN
 103 NORTH LAKE DRIVE
 SUITE B
 ORMOND BEACH FL 32714**

Name

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

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00

**Make Check Payable to Department of State
 Due By May 1, 2002**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**Partner
 LGL Partners, LLC
 103B N. Lake Dr.
 Ormond Beach, FL 32114**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**Partner
 Slappy's Pizza Buffet, LLC
 1200 Int'l Speedway Blvd.
 Daytona Beach, FL 32114**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 NAME
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 CITY-ST-ZIP

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:

Signature Required
Steven Sharpes

4/8/02

(386) 254-5722

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083 (9/01)