| DOCUME | RATION REPORT | | | | 3. Mortham ry of State | | | | | | | |
|---|---|--|--|--|--|--|---|---|---------------------------|--------------------|--|---|
| , Corporation Nar NTH PIZ | ENT # me zza, inc. | L3939 | 6 | (1) | | | | | | | | |
| Principal Place of E 4795 FAY BLVE COCOA FL 329 US | D #23 | | Ma | ling Address 4795 FAY BLVD #23 COCOA FL 32927 US | | | 3. | Date incorporated or Q | | 3a. Date o | | port |
| Principal Place | of Business | | 2a. | Mailing Address | | | 4. | 12/26/1989 FEI Number | | V | A | pplied For |
| Suite, Apt. #, et | nic. | | 26 | Suite, Apt. #, etc. | | | 5 | 43-1533711 Certificate of Status De | sired | | \$8.75 | lot Applicable Additional |
| City & State | | | 27 | City & State | | | | Election Campaign Fina | ancing | | | Required May Be |
| <u>]</u> | | | 28 | | Count | | | Trust Fund Contribution This corporation has lia | <u>)</u> | | Added | to Fees |
| Žip I | 25 | ountry | 29 | Zıp | 30 | ·y | | Florida Statutes | Yes | 🗌 No | | |
| 9 | g. Name and | Address of Current | t Regisl | tered Agent | | 1 Name | 10 | Name and Address o | of New Re | gistered Ag | gent | |
| BRIGGS, | | | | | 8 | 2 Street | Address (F | P.O. Box Number is Not a | Acceptable |) | | |
| | odhaven d Rne fl 3293 | | | | Ĩ | 3 | | | | | | |
| MECOOO | | ~ | | | 1 | 4 City | | | | | 85 Zip | Code |
| It Pursuant to th | he provisions o | Sections 607.0502 | and 60 | 7 1508 Elorido Stal da | o the obou | | | and mits this statement for | x the pure | FL ose of chan | aina its re | |
| or registered a | agent, or both, | In the State of Hono | ia. Such |) change was authoriz€ | ed by the co | rporation's | poration board of a | directors. Thereby accept | t the appoi | intment as re | egistered | agent. 1 am |
| or registered a familiar with, a SIGNATURE Sign 2. | and accept the nature, typed or prints | obligations of, Section ad name of registered agent of OFFICERS AND | and title if a |) change was authorize 0505, Florida Statutes. applicable (NO | ed by the co | rporation's | board of (| directors. Thereby accept | t the appor | DATE | gistereo | |
| or registered a familiar with, a SIGNATURE | and accept the nature, typed or profit S BRIGGS, C 10503 E. 2 | obligations of, Section of name of registered action of OFFICERS AND CHRISTINE 24TH HWY | and title if a |) change was authorize 0505, Florida Statutes. assicable (NO CTORS | E Registered A | poration's | equired when | Reinstating) ADDITIONS/CHANGES | TO OFFIC | DATE | DIRECTO | RS IN 12 |
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| or registered 2 familiar with, a IGNATURE 2. TLE AME IREE1 ADORESS ITY - ST - ZIP TLE AME | S BRIGGS, C 10503 E. 2 INDEPEND D BRIGGS, F | obligations of, Section of registered at and OFFICERS AND CHRISTINE 24TH HWY ENCE MO ROBERT A. | and title if a |) change was authorize 0505, Florida Statutes. assicable (NO CTORS | All All <td>rporation's gent signature r .E EET ADDRESS '- ST-ZIP .E</td> <td>poard of a equired when 4795 Cocco</td> <td>reinstating) ADDITIONS/CHANGES 7ay B1Vd #2 2 7L 3399</td> <td>5 TO OFFIC 2 3 12 7</td> <td>DATE CERS AND D</td> <td>DIRECTO</td> <td>RS IN 12</td> | rporation's gent signature r .E EET ADDRESS '- ST-ZIP .E | poard of a equired when 4795 Cocco | reinstating) ADDITIONS/CHANGES 7ay B1Vd #2 2 7L 3399 | 5 TO OFFIC 2 3 12 7 | DATE CERS AND D | DIRECTO | RS IN 12 |
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