

2001 UNIFORM BUSINESS REPORT (UBR)

3

FILED
Apr 03, 2001 8:00 am
Secretary of State

03-19-2001 90058 011 ***150.00

DOCUMENT # P00000008942

1. Entity Name

PIZZAZZ INT'L GROUP, INC.

Principal Place of Business

Mailing Address

**3019 N JOHN YOUNG PARKWAY
ORLANDO FL 32804**

**3019 N JOHN YOUNG PARKWAY
ORLANDO FL 32804**

2. Principal Place of Business

Same

3. Mailing Address

Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Same

City & State

Same

4. FEI Number

59-3352134

Applied For

Not Applicable

Zip

32804

Country

U.S.A.

Zip

32804

Country

U.S.A.

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**BRANDI, LUIGI JR
3019 N JOHN YOUNG PARKWAY
ORLANDO FL 32804**

7. Name and Address of New Registered Agent

Name

Same

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

Luigi Brandi Jr

(NOTE: Registered Agent signature required when reinstating)

3-29-01

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ (See criteria on back)

**FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE **Pres.** ☐ Delete
NAME **Luigi Brandi Jr**
STREET ADDRESS **3019 N. John Young Parkway**
CITY-ST-ZIP **Orlando, FL 32804**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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

13. 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 or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Luigi Brandi Jr

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-16-01

Date

407-294-9044

Daytime Phone #

CR2E034 (10/00)