2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

DOCUMENT # P00000028796

1. Entity Name

PALM BEACH PIZZA SYSTEMS, INC.



FILED Apr 14, 2008 08:00 Al Secretary of State

Principal Place of Business

Mailing Address

1801 PALM BCH LAKES BLVD., SUITE 876 W. PALM BCH, FL 33401

1801 PALM BCH LAKES BLVD., SUITE 876 W. PALM BCH, FL 33401



No Chg-P

04092008

CR2E034 (11/05)

DO NOT WRITE IN THIS SPAC			4. FEI Number 65-1048883			Applied For Not Applicable		
				5. Certificate	\$8.75 Additional Fee Required			
	6. Name and Address of Current Regist	ered Agent		•				
RIVERA, PEDRO L 1801 PALM BCH LAKES BLVD., SUITE 876 W. PALM BCH, FL 33401			DO NOT WRITE IN THIS SPACE					
	e named entity submits this statement for the p tions of registered agent.		ed office or r	egistered agent, or bo	oth, in the State of Flo			
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered				gent signature required when reinstating) DATE				
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.			cing	\$5.00 May Be Added to Fees				
10. OFFICERS AND DIRECTORS								
TITLE NAME STREET ADDRESS	D RIVERA, PEDRO L 7725 BANYAN TERR							

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04/24/08-80084-023 150.00

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. If 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP DILE NAME STREET ADDRESS

City-St-ZIP

TITLE NAME STREET ADDRESS CITY - ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

TITLE

NAME

FORT LAUDERDALE, FL 33321

NG OFFICER OR DIRECTOR SIGNATURE AND TYPED OR PRINTED NAME OF SIGN

PEDRO L. RiverA 4