


FILED
Apr 03, 2006 8:00 am
Secretary of State

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03-03-2006 90124 006 ***150.00

**2006 FOR PROFIT CORPORATION
 ANNUAL REPORT**

DOCUMENT # P0000061380 1. Entity Name CES PIZZA, INC	
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Principal Place of Business 11150 OKEECHOBEE BLVD. ROYAL PALM BEACH, FL 33411	Mailing Address 11150 OKEECHOBEE BLVD. ROYAL PALM BEACH, FL 33411
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66008200



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02012006	No Chg-P	CR2E034 (11/05)
4. FEI Number 65-1022217	Applied For	Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	

5. Name and Address of Current Registered Agent SOTO, CHRISTA E 11150 OKEECHOBEE BLVD ROYAL PALM BEACH, FL 33411	<p style="font-size: 24pt; font-weight: bold;">DO NOT WRITE IN THIS SPACE</p>
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6. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: *Christa E Soto* _____ DATE: _____

Signature typed or printed name of registered agent and title if applicable. (UAD12) Registered Agent signature required when renouncing.

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE	PD
NAME	SOTO, CHRISTA E
STREET ADDRESS	11150 OKEECHOBEE BLVD
CITY - ST - ZIP	ROYAL PALM BEACH, FL 33411
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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

SIGNATURE: *Christa E Soto* _____ DATE: 03/28/06 (561) 793-1166

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR. Case. Company Phone.