

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Sep 04, 2002 8:00 am
Secretary of State

09-04-2002 90094 041 ***150.00

DOCUMENT # P00000089419

1. Entity Name

JJ'S PIZZA, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

405 CENTRAL AVE.

Suite, Apt. #, etc.

3. Mailing Address

405 CENTRAL AVE

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

ST. PETERSBURG, FL.

City & State

ST. PETERSBURG, FL.

4. FEI Number

59-3675019

Applied For

Not Applicable

Zip

33701

Country

U.S.

Zip

33701

Country

U.S.

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

DELEONARDIS MORENO

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

405 CENTRAL AVE.

City

ST. PETERSBURG

FL

Zip Code

33701

**DO NOT WRITE
IN THIS SPACE**

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 date if applicable.

(NOTE: Registered agent signature required when re-filing)

DATE

9. This corporation is eligible to satisfy its intangible

tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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	DP
NAME	DELEONARDIS MORENO
STREET ADDRESS	405 CENTRAL AVE
CITY-STATE-ZIP	ST. PETERSBURG, FL. 33701
TITLE	DS
NAME	DELEONARDIS LUCA
STREET ADDRESS	405 CENTRAL AVE
CITY-STATE-ZIP	ST. PETERSBURG, FL. 33701
TITLE	DT
NAME	DELEONARDIS CARMELA
STREET ADDRESS	405 CENTRAL AVE.
CITY-STATE-ZIP	ST. PETERSBURG, FL. 33701
TITLE	
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**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Moeno Deleonardis
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8.27.02

727 898-2300
Daytime Phone #

CR2E034B (12/01)

attachment

978209

P00000089419

Uniform Business Report
Division of Corporations
P.O. Box 1500
Tallahassee, Fl. 32302-1500

Re: JJ'S PIZZA, INC.
P00000089419

July-2, 2002

To Whom It May Concern:

We have not received our Annual Report from you, and believe that it should have been filed by now. When contacting your office, we were told to download form from your site. Attached is filled in form and the \$150.00 filing fee. Please process and update our records.

Thank you in advance for your cooperation



Moreno DeLeonardis
President