

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Oct 02, 2002 8:00 am
Secretary of State

09-17-2002 90091 019 ***550.00

DOCUMENT # P01000077561

1. Entity Name
DA VINCI PIZZA INC.

Principal Place of Business
22088 S TAMAMI TRAIL, SUITE 1
ESTERO FL 33920

Mailing Address
22088 S TAMAMI TRAIL, SUITE 1
ESTERO FL 33920

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-1148722

Applied For

Not Applicable

Zip
33928Country
U.S.AZip
33928Country
U.S.A5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

MARSALA, STEPHEN
21557 WINDHAM RUN
ESTERO FL 33928

7. Name and Address of New Registered Agent

Name **MANSACH, STEPHEN**
 Street Address (P.O. Box Number is Not Acceptable)
21675 Windham RUN
 City **Estero** FL Zip Code **33928**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Stephen Mansacha Vice President **STEPHEN MANSACH**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME **PD**
 STREET ADDRESS **MANISCALCO, CHARLES G**
 CITY-ST-ZIP **22088 S TAMAMI TRAIL, SUITE 1**
ESTERO FL 33920 ☐ Delete

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

TITLE
 NAME **VD**
 STREET ADDRESS **MARSALA, STEPHEN**
 CITY-ST-ZIP **22088 S TAMAMI TRAIL, SUITE 1**
ESTERO FL 33920 ☐ Delete

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

TITLE
 NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

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TITLE
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 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:

Stephen Mansacha **STEPHEN MANSACH** Vice President
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/11/02

239-495-8422

CR2E034 (4/02)