

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 03, 2002 8:00 am
Secretary of State

05-03-2002 90157 043 ***150.00

DOCUMENT # P01000090465

1. Entity Name
PIZZA DEPOT, INC.

Principal Place of Business

4699 FOREST LANE
 LAKE WORTH FL 33463

CHANGE TO

Mailing Address

4699 FOREST LANE
 LAKE WORTH FL 33463

CHANGE TO



2. Principal Place of Business

2650 S. Military Tr.
 Suite, Apt. #, etc. #17

3. Mailing Address

2650 S. Military Trail
 Suite, Apt. #, etc. #17

DO NOT WRITE IN THIS SPACE

City & State

West Palm Beach FL

City & State

West Palm Beach, FL

4. FEI Number

65-1152524

Applied For

Not Applicable

Zip 33415

Country

Zip 33415

Country

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GERSON, GARY N

1645 PALM BEACH LAKES BLVD., SUITE 1200
 WEST PALM BEACH FL 33401

7. Name and Address of New Registered Agent

Name

Michael DelGozzo

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

4699 Forest Lane

City

Lake Worth

FL

Zip Code

33463

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 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 \$150.00
After May 1, 2002 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 ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☒ Addition
 NAME President
 STREET ADDRESS Michael DelGozzo
 CITY-ST-ZIP 4699 Forest Lane
 Lake Worth, FL 33463

TITLE ☐ Change ☒ Addition
 NAME Vice President
 STREET ADDRESS Vincent DelGozzo
 CITY-ST-ZIP 4699 Forest Lane
 Lake Worth, FL 33463

TITLE ☐ Change ☒ Addition
 NAME Secretary/Treasurer
 STREET ADDRESS GREGORY DelGozzo
 CITY-ST-ZIP 4699 Forest Lane
 Lake Worth, FL 33463

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

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

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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE 4/18/02 (561) 967-4175

Date

Daytime Phone #

CR2E034 (9/01)