

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jun 05, 2003 8:00 am**  
**Secretary of State**

04-28-2003 91491 002 \*\*\*150.00  
06-05-2003 90132 040 \*\*\*\*35.00

**DOCUMENT # P01000104099**

1. Entity Name

**PIZZA BANANA INC.**



Principal Place of Business

3440 HOLLYWOOD BLVD Ste. # 300  
HOLLYWOOD FL 33021

Mailing Address

3440 HOLLYWOOD BLVD Ste. # 300  
HOLLYWOOD FL 33021

2. Principal Place of Business

7601 EAST TREASURE DR.

2. Mailing Address

7601 EAST TREASURE DR.

Subs. Apt. #, etc.

Ste 610

Subs. Apt. #, etc.

Ste 610

City & State

NORTH BAY VILLAGE FL

City & State

NORTH BAY VILLAGE FL

Zip

33141

Country

USA

Zip

33141

Country

USA

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number

65-1149347

☒ Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

LEONARDO A. ROTH ESQ.  
c/o Roth, Russo & Darrach, P.A.  
3440 HOLLYWOOD BLVD Ste. #300  
HOLLYWOOD FL 33021

7. Name and Address of New Registered Agent

Name RODOLFO ZILLO

Street Address (P.O. Box Number is Not Acceptable)  
7601 EAST TREASURE DR. Ste 610

City NORTH BAY VILLAGE

FL

Zip Code

33141

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

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

(NOTE: Registered Agent's signature must not appear in this space)

Date

9. Election Campaign Financing  
Trust Fund Contribution.

☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD  
NAME RODOLFO ZILLO  
STREET ADDRESS 3440 HOLLYWOOD BLVD Ste. # 300  
CITY-ST-ZIP HOLLYWOOD FL 33021 ☐ Delete

TITLE VP  
NAME OLGA CRISTINA DE ZILLO  
STREET ADDRESS 3440 HOLLYWOOD BLVD Ste. # 300  
CITY-ST-ZIP HOLLYWOOD FL 33021 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD  
NAME RODOLFO ZILLO  
STREET ADDRESS 7601 EAST TREASURE DR. Ste 610  
CITY-ST-ZIP NORTH BAY VILLAGE FL 33141 ☐ Change ☐ Addition

TITLE VP  
NAME OLGA CRISTINA DE ZILLO  
STREET ADDRESS 7601 EAST TREASURE DR. Ste 610  
CITY-ST-ZIP NORTH BAY VILLAGE FL 33141 ☐ Change ☐ Addition

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

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

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

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

12. 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 10 or Block 11 if changed, or on an statement with an address, with all other like empowered

SIGNATURE:

*[Signature]*

305-866-0667

90138660

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

- MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO:  
DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314**