2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000073528

Entity Name: STEVE'S PIZZA, INC.

City-St-Zip:

CORAL SPRINGS, FL 33071

FILED Jan 27, 2005 Secretary of State

		1 1227 1, 11 10.			
Current Principal Place of Business:			New Principal P	New Principal Place of Business:	
5866 S. FLAMINGO ROAD COPPER CITY, FL 33330				5866 S. FLAMINGO ROAD COOPER CITY, FL 33330	
Current M	ailing Addres	s:	New Mailing Add	New Mailing Address:	
C/O MICHAEL FRANZ, CPA 2425 HOLLYWOOD BLVD HOLLYWOOD, FL 33020				LORI KAMIAB 5866 S. FLAMINGO ROAD COOPER CITY, FL 33330	
FEI Number:	30-0092963	FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Addre	Name and Address of New Registered Agent:	
THERESA M. PETERSON, P.A. 2425 HOLLYWOOD BLVD HOLLYWOOD, FL 33020 US				KAMIAB, LORI 5866 S. FLAMINGO ROAD COOPER CITY, FL 33330 US	
The above in the State		submits this statement for the p	ourpose of changing its regis	stered office or registered agent, or both,	
SIGNATURE: LORI KAMIAB				01/27/2005	
	Electron	ic Signature of Registered Age	ent	Date	
Election Can	npaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHA	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	V () SIEGLE, MYRN 1101 COLONY PEMBROKE PII	POINT CIR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P () KAMIAB, LORI 12600 NW 6TH CORAL SPRING		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	D () RAMIEREZ, JAS 12600 NW 6TH		Title: Name: Address:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: LORI KAMIAB P 01/27/2005