# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000101478

Entity Name: KONGO'S PIZZA, CORP.

**Current Mailing Address:** 

## FILED Apr 09, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
Current Principal Place of Business:	New Principal Place of Business

240 EAST 1ST AVENUE 240 EAST 1ST AVENUE 124 123

HIALEAH, FL 33010 HIALEAH, FL 33010

831 EAST 10TH PLACE 240 EAST 1 ST AVENUE HIALEAH, FL 33010 123

HIALEAH, FL 33010

**New Mailing Address:** 

FEI Number: 52-2378016 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GUEVARA, ALDO
831 EAST 10TH PLACE
4242 NW 2 ST
HIALEAH, FL 33010 US
4242 NW 2 ST
1416
MIAMI, FL 33126 US

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: 04/09/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

### **OFFICERS AND DIRECTORS:**

PD () Delete

Name: GUEVARA, ALDO Address: 831 E. 10TH PLACE

City-St-Zip: HIALEAH, FL 33010
Title: DVP ( ) Delete

Name: GUEVARA, ALAIN Address: 831 E. 10TH PLACE City-St-Zip: HIALEAH, FL 33010

Title: ( ) Delete

Name: Address: City-St-Zip:

Title:

### ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition

Name: GUEVARA, ALDO Address: 4242 NW 2 ST APT 1416

City St 7in: MIAMI EL 22126

City-St-Zip: MIAMI, FL 33126

Title: DVP (X) Change () Addition

Name: GUEVARA, ALAIN

Address: 4242 NW 2 ST APT 1002

City-St-Zip: MIAMI, FL 33126

Title: DVP ( ) Change (X) Addition

 Name:
 FONSECA, PRAXEDES

 Address:
 4242 NW 2 ST APT 1416

 City-St-Zip:
 MIAMI, FL 33126

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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.

SIGNATURE: ALAIN GUEVARA DVP 04/09/2007