2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000000342

Entity Name: PIZZA.NET, INC.

FILED Jun 21, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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255 NE 2ND AVENUE 255 NE 2ND AVENUE

SUITE 313 SUITE 313

DELRAY BEACH, FL 33444 US DELRAY BEACH, FL 33444 US

Current Mailing Address: New Mailing Address:

255 NE 2ND AVENUE 255 NE 2ND AVENUE

SUITE 313 SUITE 313

DELRAY BEACH, FL 33444 US

FEI Number: 33-1038145 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:

CHARLES L. JAFFEE, P.A.

CHARLES L. JAFFEE, P.A.

1701 W. HILLSBORO BLVD. 7301- A WEST PALMETTO PARK RD. SUITE 303 SUITE 305 C

DEERFIELD BEACH, FL 33442 US BOCA RATON, FL 33433 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: CHARLES JAFFEE, PA 06/21/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP () Delete Title: CEO (X) Change () Addition
Name: REISER, JULIE Name: PARKER, GERALD C CEO
Address: 255 NE 2ND AVENUE, SUITE 313 Address: 625 N. FLAGLER DRIVE, SUITE 605

Address: 255 NE 2ND AVENUE, SUITE 313

City-St-Zip: DELRAY BEACH, FL 33444 US

City-St-Zip: WEST PALM BEACH, FL 33401 US

Title: () Delete Title: P D () Change (X) Addition

Name: REISER, JULIE P D

 Address:
 Address:
 255 NE 2ND AVENUE, SUITE 313

 City-St-Zip:
 City-St-Zip:
 DELRAY BEACH, FL 33444 US

Title: () Delete Title: S T () Change (X) Addition

Name: Name: O'KANE, KEVIN

Address: Address: 625 N. FLAGLER DRIVE, SUITE 605
City-St-Zip: City-St-Zip: WEST PALM BEACH, FL 33401 US

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: JULIE REISER P D 06/21/2006