

**2004 FOR PROFIT CORPORATION REINSTATEMENT**

**FILED  
Oct 04, 2004  
Secretary of State**

DOCUMENT# P03000018556

Entity Name: MARCELLA'S PIZZA, INC.

**Current Principal Place of Business:**

1303 UNIT B HWY 441  
CITRA, FL 32113

**New Principal Place of Business:**

**Current Mailing Address:**

1303 UNIT B HWY 441  
CITRA, FL 32113

**New Mailing Address:**

FEI Number: 75-3100496      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

DUVALL, BRUCE  
14260 NE 40 COURT  
ANTHONY, FL 32167      US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title:            D            ( ) Delete  
Name:            DUVALL, BRUCE  
Address:        14260 NE 40 COURT  
City-St-Zip:    ANTHONY, FL 32167

Title:            ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:            P            (X) Change ( ) Addition  
Name:            DUVALL, BRUCE  
Address:        14260 NE 40 COURT  
City-St-Zip:    ANTHONY, FL 32167

Title:            VP            ( ) Change (X) Addition  
Name:            DUVALL, MELISSA  
Address:        14260 N.E. 40TH COURT  
City-St-Zip:    ANTHONY, FL 32167

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.

SIGNATURE: BRUCE DUVALL

P

10/04/2004

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date