

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000025816

Entity Name: SHOWCASE PIZZA, INC.

FILED
Jan 19, 2006
Secretary of State

Current Principal Place of Business:

373 RIVERCHASE DRIVE
ORLANDO, FL 32807

New Principal Place of Business:

Current Mailing Address:

373 RIVERCHASE DRIVE
ORLANDO, FL 32807

New Mailing Address:

FEI Number: 47-0911906

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LACOMMARE, ANTONIELLA
10-112 EASTMAR COMMONS BLVD #1223
ORLANDO, FL 32825 US

Name and Address of New Registered Agent:

LACOMMARE, ANTONIELLA
373 RIVER CHASE DR
ORLANDO, FL 32801 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:

01/19/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: LACOMMARE, ANTONIELLA
Address: 373 RIVERCHASE DRIVE
City-St-Zip: ORLANDO, FL 32807

Title: VPS () Delete
Name: PARADISO, FRANCESCO A
Address: 373 RIVERCHASE DRIVE
City-St-Zip: ORLANDO, FL 32807

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ANTONIELLA PARADISO

PT

01/19/2006

Electronic Signature of Signing Officer or Director

Date