

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000059729

Entity Name: DUOS' PIZZARIA, INC.

FILED  
Apr 27, 2005  
Secretary of State

## Current Principal Place of Business:

13799 BEACH BLVD  
UNIT 5  
JACKSONVILLE, FL 32224

## New Principal Place of Business:

## Current Mailing Address:

1358 BLUE EAGLE WAY E.  
JACKSONVILLE, FL 32225

## New Mailing Address:

FEI Number: 58-2672334

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HEAD, KOKO  
9309 OLD KINGS RD., STE. 4  
JACKSONVILLE, FL 32257 US

## Name and Address of New Registered Agent:

SIMON, DENNNIS  
1358 BLUE EAGLE WAY E.  
JACKSONVILLE, FL 32225 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: DENNIS R. SIMON

04/27/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete  
Name: SIMON, DENNIS R  
Address: 1358 BLUE EAGLE WAY  
City-St-Zip: JACKSONVILLE, FL 32225

Title: VP ( ) Delete  
Name: SIMON, MATTHEW P  
Address: 1358 BLUE EAGLE WAY  
City-St-Zip: JACKSONVILLE, FL 32225

Title: VP ( ) Delete  
Name: SIMON, MARC S  
Address: 1358 BLUE EAGLE WAY  
City-St-Zip: JACKSONVILLE, FL 32225

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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: DENNIS R. SIMON

PRES

04/27/2005

Electronic Signature of Signing Officer or Director

Date