## 2005 FOR PROFIT CORPORATION

## **ANNUAL REPORT**

Aug 19, 2005 8:00 am Secretary of State DOCUMENT # P04000042154 07-14-2005 90081 013 \*\*\*150.00 BIZZARRO'S PIZZA OF MERRITT ISLAND, INC. DUUUAUUU Principal Place of Business Mailing Address 325-L EAST MERRITT ISLAND CAUSEWAY 2076 ABALONE AVE MERRITT ISLAND, FL 32952 INDIALANTIC, FL 32903 2. Principal Place of Business Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 08162005 CR2E034 (10/03) Chq-P Applied For City & State City & State 4. FEI Number Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name COLOMBO, JOSEPH G ESQ Street Address (P.O. Box Number is Not Acceptable) 2351 W EAU GALLIE BLVD STE 1 MELBOURNE, FL 32935 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE\_ Signature, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the Due by September 7, 2005 Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. DS TITLE Defete ☐ Change ☐ Addition TITLE DEFRANCESCO, DOMENICO NAME 2076 ABALONE AVE STREET ADORESS STREET ADDRESS CITY-ST-ZIP INDIALANTIC, FL 32903 CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition DEFRANCESCO, AGATHA NAME NAME STREET ADDRESS 2076 ABALONE AVE STREET ADDRESS INDIALANTIC, FL 32903 CITY-ST-7IP CITY - ST-7IP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Addition TITLE ☐ Change NAME NAME

12. I hereby certify that the information supplied with this filing does not qualify 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 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 fursities empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attacture of the chapter 607, Florida Statutes and that my name appears in Block 10 or Block 11 if changed.

STREET ADDRESS

CITY-ST-7IP

SIGNATURE!

STREET ADDRESS

CITY-ST-ZIP

monico Pancesco SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daylime Phone #

**FILED** 

ATTACHMENT

Bizzaro's Pizza of Merritt Island
2076 Abalone Ave

Indialantic, FL 32903

PU40000 42154

August 16, 2005

Division of Corporation PO Box 6227 Tallahassee, FL 32314

RE:

UBR for Bizzaro's Pizza of Merritt Island

To Whom It May Concern:

Please find enclosed a check in the amount of \$150.00 and information for my Uniform Business Report. I respectfully request an abatement of the Late Filing Fee, but I never received a reminder for my annual report.

I thank you for your help in this matter.

Very truly yours,

Domenico DeFrancesco

manies De Tanceses



## FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

July 18, 2005

BIZZARRO"S PIZZA OF MERRITT ISLAND, INC. 2076 ABALONE AVE INDIALANTIC, FL 32903

Subject: BIZZARRO'S PIZZA OF MERRITT ISLAND, INC.

\_Reference Number:

P04000042154

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

The fee to file the profit annual report/uniform business report is \$150.00 plus \$400.00 late fee for a total of \$550.00. If a certificate of status is desired, please add an additional \$8.75.

There is a balance due of \$400.00.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/LS ANNUAL REPORTS SECTION