

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000107127

Entity Name: TONY'S PIZZA CO.

FILED
May 01, 2009
Secretary of State

Current Principal Place of Business:

7550 SOUTH U.S. 1
PORT ST. LUCIE, FL 34952

New Principal Place of Business:

Current Mailing Address:

7550 SOUTH U.S. 1
PORT ST. LUCIE, FL 34952

New Mailing Address:

FEI Number: 20-1421827

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAFENNA, ANTONIO
1205 DRIFTWOOD LANE
FORT PIERCE, FL 34982 US

Name and Address of New Registered Agent:

LAPENNA, ANTONIO
1205 DRIFTWOOD LANE
FORT PIERCE, FL 34982 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: ANTONIO LAPENNA

05/01/2009

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: O () Delete
Name: LAFENNA, ANTONIO
Address: 1205 DRIFTWOOD LANE
City-St-Zip: FORT PIERCE, FL 34982

Title: O () Delete
Name: LAFENNA, DOMENICO
Address: 925 S.E. BREAKWATER AVE
City-St-Zip: PORT ST. LUCIE, FL 34952

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: O (X) Change () Addition
Name: LAPENNA, ANTONIO
Address: 1205 DRIFTWOOD LANE
City-St-Zip: FORT PIERCE, FL 34982

Title: O (X) Change () Addition
Name: LAPENNA, DOMENICO
Address: 925 S.E. BREAKWATER AVE
City-St-Zip: PORT ST. LUCIE, FL 34952

I hereby certify that the information supplied with this filing does not qualify 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: ANTONIO LAPENNA

OWNE

05/01/2009

Electronic Signature of Signing Officer or Director

Date