2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 14, 2007 8:00 am
Secretary of State
05-14-2007 90065 026 ***150.00

DOCUMENT # P05000085967

1. Entity Name
CINO'S PIZZA, INC.

Principal Place of Business	Mailing Address
425 W TOWN PL STE 114 SAINT AUGUSTINE, FL 32092	3915 ARBOR LAKE DR W JACKSONVILLE, FL 32225

04252007 Chg-P CR2E034 (12/06)

2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
		425 W. TOWN PL	
Suite, Apt. #, etc.		Suite, Apt. #, etc. 114	
City & State		City & State ST AUGUSTINE	
Zip	Country	Zip 32092	Country USA

4. FEI Number 20-3010800 ☐ Applied F[...] ☐ Not Applic[...]

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

TURKEL, FIGEN
3915 ARBOR LAKE DR W
JACKSONVILLE, FL 32225

7. Name and Address of New Registered Agent

Name TURKEL FIGEN
Street Address (P.O. Box Number is Not Acceptable) 425 W TOWN PL STE 114
City ST AUGUSTINE FL Zip Code 32092

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 acc[...] the obligations of registered agent.

SIGNATURE FIGEN TURKEL PRESIDENT [signature] DATE 04/24/07
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1[...]		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD TURKEL, FIGEN 3915 ARBOR LAKE DR W JACKSONVILLE, FL 32225	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD TURKEL FIGEN 4000 SIOUX CIRCLE JACKSONVILLE FL 32259	☑ Change ☐ Ad[...]
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST TURKEL, SINAN 3915 ARBOR LAKE DR W JACKSONVILLE, FL 32225	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST TURKEL, SINAN 4000 SIOUX CIRCLE JACKSONVILLE, FL 32259	☒ Change ☐ Ad[...]
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Ad[...]
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Ad[...]
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Ad[...]
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Ad[...]

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the informati[...] 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 direc[...] 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 in Block 10 or Block [...] changed, or on an attachment with an address, with all other like empowered.

X FIGEN TURKEL PRESIDENT [signature] 04/24/07