

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000063962

FILED
Jan 19, 2007
Secretary of State

Entity Name: NEW YORK CITY PIZZA DELIVERY CO.

Current Principal Place of Business:

P.O. BOX 152502
CAPE CORAL, FL 33915 US

New Principal Place of Business:

18731 THREE OAKS PKWY
FORT MYERS, FL 33912 US

Current Mailing Address:

P.O. BOX 152502
CAPE CORAL, FL 33915 US

New Mailing Address:

1820 SE 6TH ST
CAPE CORAL, FL 33990 US

FEI Number: 20-4844941

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPERR, STEVEN
1820 SE 6TH STREET
CAPE CORAL, FL 33990 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P, T () Delete
Name: SPERR, STEVEN
Address: P.O. BOX 152502
City-St-Zip: CAPE CORAL, FL 33915 US

Title: VP, S () Delete
Name: SPERR, DULCE
Address: P.O. BOX 152502
City-St-Zip: CAPE CORAL, FL 33915 US

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: DULCE SPERR

V P

01/19/2007

Electronic Signature of Signing Officer or Director

Date