2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000121826

Entity Name: PIZZA MANIA IV, INC.

FILED Apr 29, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 318 9TH STREET NORTH TRINITY PLAZA NAPLES, FL 34102 **New Mailing Address: Current Mailing Address:** 4634 PALM BEACH BLVD. 10090 INTERCOM DR. **UNIT B13** 2ND FLOOR STE#3 FT. MYERS, FL 33905 FT. MYERS, FL 33913 FEI Number: 20-5606906 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: VENETIS, TOM C VENETIS, TOM C 4634 PALM BEACH BLVD. 10090 INTERCOM DR. 2ND FLOOR STE#3 UNIT B13 FT. MYERS, FL 33905 US FT. MYERS, FL 33913 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: TOM C. VENETIS 04/29/2008 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PRFS () Delete Title: () Change () Addition VENETIS, TOM C Name: Name: 9421 CHARTWELL BREEZE DRIVE Address: Address: City-St-Zip: BONITA SPRINGS, FL 34135 US City-St-Zip: Title: VΡ Title: () Delete (X) Change () Addition Name: HIDIROGLOU, IPATIOS A Name: TOM. VENETIS C 24748 LSKEMONT COVE # I201 9421 CHARTWELL BREEZE DRIVE Address: Address: BONITA SPRINGS, FL 34134 US BONITA SPRINGS, FL 34135 US City-St-Zip: City-St-Zip: Title: SECY () Delete Title: () Change () Addition VENETIS, TOM C Name: Name: 9421 CHARTWELL BREEZE DRIVE Address: Address: BONITA SPRINGS, FL 34135 US City-St-Zip: City-St-Zip: Title: DIR () Delete Title: () Change () Addition VENETIS, TOM C Name: Name: 9421 CHARTWELL BREEZE DRIVE Address: Address: City-St-Zip: BONITA SPRINGS, FL 34135 US City-St-Zip:

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: TOM C. VENETIS PRES 04/29/2008