2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000061609

P.O. BOX 1273

AUBURANDALE, FL 33823

Address:

City-St-Zip:

Entity Name: PALACE PIZZA BARTOW INC

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
105 E MAI BARTOW,	N ST , FL 33830	US			
Current M	lailing Addr	ess:	New Mailing Address	:	
105 E MAI BARTOW,	N ST , FL 33830	US			
FEI Number	: 26-0240311	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	l Address of	f Current Registered Agent:	Name and Address of	New Registered Agent:	
510 MARE	TING , TAX 8 EAM ROAD D, FL 33809	FINANCIAL SERVICES, INC	ACCOUNTING , TAX & 510 MARCUM ROAD LAKELAND, FL 33809	FINANCIAL SERVICES, INC	
	e named entit e of Florida.	ry submits this statement for the	purpose of changing its registered	office or registered agent, or both,	
SIGNATU	RE: ALICE	A MILLER		04/30/2009	
	Electr	onic Signature of Registered Ag	ent	Date	
Election Car	mpaign Financ	ing Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	MORIELLO, 5760 HIGH R		Title: (Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP LANUTO, GIO 2346 COUPL LAKELAND,	ES DRIVE	Title: (Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:			Title: (Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:		() Delete GIUSEPPE S	Title: (Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: SALVATORE ESPOSITO SEC 04/30/2009