


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2008 8:00 am
Secretary of State

04-21-2008 90096 035 ***150.00

DOCUMENT # P07000093510 1. Entity Name CAPRI PIZZA AND MORE, INC.																													
Principal Place of Business 5109 GATO DEL SOL CIRCLE WESLEY CHAPEL, FL 33544			Mailing Address 5109 GATO DEL SOL CIRCLE WESLEY CHAPEL, FL 33544																										
2. Principal Place of Business - No P.O. Box # 7825 GALL BLVD Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.																											
City & State Zephyrhills, FL Zip 33541-4317		City & State Zip		4. FEI Number 65-1294064																									
Country USA		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																									
6. Name and Address of Current Registered Agent INCORPORATE USA, INC. 3150 SANDY RIDGE DR CLEARWATER, FL 33761				7. Name and Address of New Registered Agent Name Philip Dirosa Street Address (P.O. Box Number is Not Acceptable) 7825 GALL BLVD City Zephyrhills FL Zip Code 33541																									
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 accept the obligations of registered agent. SIGNATURE Philip Dirosa Pres DATE 4-15-2008 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>																													
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																										
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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 information 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.																													
SIGNATURE: Philip Dirosa Pres Philip Dirosa Pres 813-783-2906 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>																													