2008 FOR PROFIT CORPORATION ANNUAL REPORT

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

04-21-2008 90068 038 ***150.00

DOCUMENT # P07000104626

1. Entity Name
WESTSHORE PIZZA BOYETTE, INC.

Principal Place of Business
371 CHANNELSIDE WALKWAY #504
TAMPA, FL 33602

Mailing Address
P.O. BOX 13137
TAMPA, FL 33681

66011198

04082008 Chg-P CR2E034 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
11643 Boyette Road	11643 Boyette Road
Suite, Apt. #, etc. Unit 113	Suite, Apt. #, etc. Unit 113
City & State Riverview Florida	City & State Riverview, FL.
Zip 33569 / Country USA	Zip 33569 / Country USA

4. FEI Number 20-1309403 — Applied For / Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
RUSSO, JOSEPH C ESQ. 3708 WEST EUCLID AVE. TAMPA, FL 33629	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!! FEE IS $150.00
After May 1, 2008 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 11	
TITLE D NAME VASATURO, ROBERT STREET ADDRESS 371 CHANNELSIDE WALKWAY #504 CITY-ST-ZIP TAMPA, FL 33602	☒ Delete	TITLE D/P/S/T NAME Wagner, Riley STREET ADDRESS 2324 Kenwick Drive CITY-ST-ZIP Valrico, FL. 33594	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE D/VP NAME Cherry, William Lamar STREET ADDRESS 10401 Elberton Ave CITY-ST-ZIP Thonotosassa, FL. 33592	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE D/VP NAME Neal, Gregory STREET ADDRESS 3701 Kalewood Place CITY-ST-ZIP Valrico, FL 33594	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

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: Riley G Wagner Riley Wagner, President 4/10/08 294-3346
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #