


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 02, 2008 8:00 am
Secretary of State

08-13-2008 90002 008 ***150.00

DOCUMENT # P07000116097					
1. Entity Name PIZZANO'S PIZZA & WINGS, INC.					
Principal Place of Business 2812 EAST MAIN STREET PAHOKEE, FL 33476			Mailing Address 2812 EAST MAIN STREET PAHOKEE, FL 33476		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 26-1294298	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For Not Applicable	
6. Name and Address of Current Registered Agent GAMBLE, LISA M 976 JUNIPER AVENUE PAHOKEE, FL 33476				7. Name and Address of Now Registered Agent Name: Richard L. Heffernan CPA Street Address (P.O. Box Number is Not Acceptable) 151 Meander Circle City: Royal Palm Beach FL Zip Code: 33411	
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: <i>Richard L. Heffernan</i> Richard L. Heffernan Aug. 8, 2008 <small>Signature, typed or printed name of registered agent, and date if applicable. (NOTE: Registered Agent signature required when releasing)</small>					
FILE NOW!!! FEE IS \$150.00 Due by September 12, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P.S CHOWDURY, MOHAMMAD 117 WATERVIEW WAY ROYAL PALM BEACH, FL 33411 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP CHOWDURY, SAYED DELWAR 117 WATERVIEW WAY ROYAL PALM BEACH, FL 33411 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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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: <i>Mohammed Chowdhury</i>		Pres. MOHAMMED CHOWDHURY 2-808 (56) 889-2993			
<small>SIGNATURE AND TYPED OR PRINTED NAME OF BOARDS OFFICER OR DIRECTOR</small>		<small>Date Daytime Phone #</small>			