2008 FOR PROFIT CORPORATION

04-25-2008 90144 019 ***150.00 FH P07000121804

ANNUAL REPORT					SECRETARY OF STATE DIVISION OF CORPORATIONS					
DOCUMENT # P07000121804 1. Entity Name WESTSHORE PIZZA HARD-ROCK, INC.				- .	VISION OF CI 1 8 JUL -7					
Principal Place of Business Mailing Address					,					
371 CHANNELSIDE WALKWAY 504 PO BOX 13137 TAMPA, FL 33602 TAMPA, FL 33681				,		•				
						RITI FORTI FORTI SONI BOTO	1 11111 1111 II	EDLACIR COM CHE	STINIETI	
2. Principal Place of Business - No P.O. Box # 3. Mailing Address										
Suite, Apt. #, etc. Suite, Apt. #, etc.			_		04232008	Chg-P	CR2E0	34 (12/06)		
City & State	City & State		<u></u> ,		4. 50 Number	14081	75		plied For Applicable	
Zip Country	Zip	Count	гу		5. Certificate of	I Status Desired		\$8.75 Add Fee Required		
6. Name and Address of Current Registered Agent				-	7. Name and	Address of New R	egistered			
RUSSO, JOSEPH C ESQ			Name							
3708 WEST EUCLID AVE TAMPA, FL 33629				Street Address (P.O. Box Number is Not Acceptable)						
·			City Zip Code							
The above named entity submits this statement for the purpose of changing its registered office or register					ed agent, or both	n, in the State of Flo		familiar with,	and accept	
the obligations of registered agent.										
SIGNATURE Signature, typed or printed name of registered agent and little 4 applicable. (NOTE: Brightured Agent signature required when reinstating). DATE										
FILE NOWILL FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be										
After May 1, 2008 Fee will be \$550.0	Trust Fund Contr	ibution.		Add	ed to Fees				_	
10. OFFICERS AND	DIRECTORS Delete	11. TOLE		מ/ס	77	CHANGES TO OFF	ICERS AN	DIFFECTORS Change	S IN 11	
NAME VASATURO, ROBERT	∟ Delete	NAME	1	V454	turo, Rob	ert	C344	A Creating	Li Action	
STREET ADDRESS 371 CHANNELSIDE WALKWAY CITY-ST-ZIP TAMPA, FL 33602	504		ET ADDRESS -SI-ZIP	371 Tal	Channe bid	Lyalkuny.	3.41			
TITLE D	Delete	THLE		130	1 PC	,,,,,,		Change	Addition	
NAME CHERRY, JR, WILLIAM L	/ \	NAM								
STREET ADDRESS 40401 ELBERTON AVE CITY-ST-ZIP THONOTOSASSA, FL 33592			ET ADDRESS - ST-ZIP						<u> </u>	
IRLE D XAME CARROLL, JAMES C	☐ Ocicte	TITLE	1					Change	Aduilou	
STREET ADDRESS 5228 SOUTH DALE MABRY HW	Y	STRE	ET ADDRESS							
CITY-ST-ZIP TAMPA, FL 33611			-ST-ZIP	5				Channe	Addition	
TITLE NAME	☐ Delete	TITLE NAM		Mar	tim, Larry 4 24 Ave			☐ Change	Arocilon	
STREET ADDRESS CITY-ST-ZIP			ET ADORESS -\$1-21P	-		JFL 33710				
DILE	☐ Delete	ពេក	i	- 12	7	H = 201,5		☐ Change	Addition	
NAME Street address		HAM STRE	ET ADURESS							
CITY-ST-ZIP	☐ Delete	CITY	- 51 • 21P					☐ Change	☐ Addition	
TITLE HAME	- Detect	NAM			\sim	1/1	/	□ crantc		
STREET ADDRESS CITY-ST-ZIP		- 1	ET ADORESS -ST-ZIP		12 1	1810	8			
12. I hereby certify that the information supplied with indicated on this report or supplemental legar is	this filing does not qualify to	or the ex	emptions of ture shall he	ontaine ave the	d in Chapter 119 same legal effect	. Florida Statutes. I	further ce	rtily that the i	dormation or director	
indicated on this report or supplemental leport is tiple and accurate and that my signature shall have the same legal effect as it made under path; that it am an officer or director of the corporation of the live lever by trusted, 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 alactinest with an above with all other like empowered.										
SIGNATURE: Robert Vasature and Types or PRINTED NAME OF BIGNING OFFICER OR DIRECTOR DESCRIPTION DATE DESCRIPTION OF DESCRIPTIO										