

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000062167

Entity Name: SCANDINAVIAN PIZZA INC.

FILED
Jul 20, 2009
Secretary of State

Current Principal Place of Business:

6518 LAKE BURDEN VIEW DRIVE
WINDERMERE, FL 34786 US

New Principal Place of Business:

8947 CONROY WINDERMERE ROAD
ORLANDO, FL 32835 US

Current Mailing Address:

6518 LAKE BURDEN VIEW DRIVE
WINDERMERE, FL 34786 US

New Mailing Address:

8947 CONROY WINDERMERE ROAD
ORLANDO, FL 32835 US

FEI Number: 26-2948768

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

OLAFSSON, HELGA
7814 CHATTERLY COURT
ORLANDO, FL 32835 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P, D () Delete
Name: ASGEIRSSON, EINAR
Address: 6518 LAKE BURDEN VIEW DRIVE
City-St-Zip: WINDERMERE, FL 34786 US

Title: S, T () Delete
Name: OLAFSSON, HELGA
Address: 6518 LAKE BURDEN VIEW DRIVE
City-St-Zip: WINDERMERE, FL 34786 US

Title: D () Delete
Name: INGASON, GISLI
Address: 6518 LAKE BURDEN VIEW DRIVE
City-St-Zip: WINDERMERE, FL 34786 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S, T (X) Change () Addition
Name: OLAFSSON, THORDIS
Address: 6518 LAKE BURDEN VIEW DRIVE
City-St-Zip: WINDERMERE, FL 34786 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: THORDIS OLAFSSON

ST

07/20/2009

Electronic Signature of Signing Officer or Director

Date