## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT



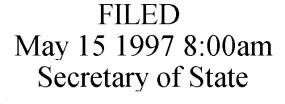
FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # POSO



Puccl's	on Name S PIZZA, INC.	Mailing Address C/O BRADSHAW LOTSPE	INL DA		
651 WASHINGTON AVENUE MIAMI BEACH FL 33139		950 SOUTH MIAMI AVEN			
		MIAMI FL 33130-4121		3. Date Incorporated or Qualified	3a. Date of Last Report
				07/02/1993	04/23/1996
2. Principal I	Place of Business	2a, Mailing Address		4. FEI Number	Applied For
21		26		65-4090566	Not Applicable
Suite, Apt	t #, etc.	Suite, Apt. #, etc		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23	28			Trust Fund Contribution	Added to Fees
, Zφ	Country	Zip	Country	8. This corporation has liability for	
24	25 9. Name and Address of Current	Registered Agent	30	Florida Statutes  10. Name and Address of New R	Yes No
I 01	TSPEICH, BRADSHAW P.A.	nogistered Agent	81 Name	10. Name and Address of New A	agisteran waarir
	) S. MIAMI AVE		00		(1.1)
MIAMI FL 33130			82 Street Ac	dress (P.O. Box Number is Not Accepta	Die)
****			83		
			84 City		85 Zip Code
11. Pursuant office or	Lto the provisions of Sections 607,0502 registered agent, or both, in the State c	and 607.1508, Florida Statu I Florida, Such change was	tes, the above-named or authorized by the corpo	orporation submits this statement for the ration's board of directors. I hereby acceptations	purpose of changing its registered to the appointment as registered
agent. La	am familiar with, and accept the obligat	ions of, Section 607.0505, F	lorida Statutes.		principal and a sugardina
SIGNATURE	Styrastre, type 4 or practed rignoral registered ages	and the description of the second	26 10		
12.	OFFICERS AND		1E: Registered Agent signature re-	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12
HILF	PD	DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	PUCCIO, THOMAS		1.2 NAME		<b>)</b>
STREET ADDRESS.	651 WASHINGTON AVENUE		1.3 STREET ADDRESS		
CHA-81-50	MIAMI BEACH NY 33139		1.4 CITY-ST-ZIP		
TIDEF	VD	DELETE	2.1 TITLE		Change Addition
NAME	ARCE, JUAN C		2.2 NAME		
STEELT ADURESS	651 WASHINGTON AVENUE MIAMI BEACH FL 33139		23 STREET ADDRESS		·
COLY S1-Z01 THILE	MININI DEACH PE 33 138	DELETE	2.4 CITY-ST-ZIP 3.1 TITLE		Change Addition
NAM!			3.1 III.E 3.2 NAME		Change ( Addition )
STREET ADDRESS			3.3 STREET ADDRESS		
Crity SI - ZiP			3.4. CITY - ST - ZIP		
10'11		DELETE	4.1 TITLE		Change Addition
MAMI			4. 2 NAME		
STREET ADDRESS	}		4.3 STREET ADORESS	,	
Culv-21 7/2		FT occurs	4.4 CHY-ST-ZIP		
III.F		☐ DELETE	5.1 TYTLE		Change L. Addition
NAME STORES AND SERVE	}		5.2 NAME		Ì
STREET ADDRESS			5.3 STREET ADDRESS		
City - St - ZiP Title		DELETE	5.4 City-St-ZiP 6.1 Title		Change Addition
NAM:	1		6.2 NAME		term serverify to be readificate
SURELL AUTOMESS			6.3 STREET AUDRESS		
CHY-ST-Z#			64 City-SI-ZiP		[
	by certify that the information supplied	will, this filing does not qual		ted in Section 119.07(3)(i), Florida Statut	es. I further certify that the

Fan an officer or director of the corporation of appears in Block 12 or Block 13 if changed to preprincing annual report is due and accurate and that my signature shall have the same legal effect as if made under of the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name of an attachment with an additions.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daylime Phone #

Date