

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000002552 (5)

1. Corporation Name

PIZZA, U.S.A. FRANCHISE CORP.



Principal Place of Business

2201 W SAMPLE RD
BLDG 9 SUITE 1A
POMPANO BEACH FL 33073

Mailing Address

2201 W SAMPLE RD
BLDG 9 SUITE 1A
POMPANO BEACH FL 33073

2. Principal Place of Business

21 1761 W. Hillsboro Blvd.

Suite, Apt. #, etc.

22 Suite 401

City & State

23 Deerfield Bch FL

Zip

24 33442

Country

2a. Mailing Address

26 1761 W. Hillsboro Blvd.

Suite, Apt. #, etc.

27 Suite 401

City & State

28 Deerfield Bch. FL

Zip

29 33442

Country

30

9. Name and Address of Current Registered Agent

DARROW, KENNETH F
9200 S DADELAND BLVD
SUITE 412
MIAMI FL 33156

3. Date Incorporated or Qualified

01/03/1994

3a. Date of Last Report

05/01/1995

4. FEI Number

65-0459425

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes

☐ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title of appointment

(NOTE: Registered Agent Signature required when membership)

(DATE)

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME CASTELLANO, JOHN N
STREET ADDRESS 2201 W SAMPLE RD BLDG 9 SUITE 1A
CITY-ST-ZIP POMPANO BEACH FL 33073

TITLE D ☐ DELETE

NAME CASTELLANO, M. MARK II
STREET ADDRESS 2201 W SAMPLE RD BLDG 9 SUITE 1A
CITY-ST-ZIP POMPANO BEACH FL 33073

TITLE P ☐ DELETE

NAME NEVIN, RAYMOND W.
STREET ADDRESS 2201 W. SAMPLE ROAD, BLDG 9, 1B
CITY-ST-ZIP POMPANO Bch FL 33073

TITLE S ☐ DELETE

NAME MARSH, ROBERT
STREET ADDRESS 2201 W. SAMPLE ROAD BLDG 9, 1B
CITY-ST-ZIP POMPANO BEACH FL 33073

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

1761 W. Hillsboro Blvd #401
Deerfield Beach FL 33442

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

1761 W. Hillsboro Blvd #401
Deerfield Beach FL 33442

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

1761 W. Hillsboro Blvd #401
Deerfield Beach FL 33442

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

1761 W. Hillsboro Blvd #401
Deerfield Beach, FL 33442

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report, or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Raymond W. Nevin

Raymond W. Nevin

4/19/96

954-428-5660

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Day

Daytime Phone

CR2E034 (12/95)