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May 08 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P94000011032 (7)

1. Corporation Name
AL'S PIZZA AND SUBS, INC.

Principal Place of Business
1915 43RD AVE.
VERO BEACH FL 32960

Mailing Address
105 41ST CT
VERO BEACH FL 32968-2447
US



3. Date Incorporated or Qualified 02/04/1994
3a. Date of Last Report 05/01/1996

2. Principal Place of Business
21 620 Old Dixie Hwy SW
26 1225 45th Court SW

Suite, Apt. #, etc.
22 Suite, Apt. #, etc.
27 Suite, Apt. #, etc.

City & State
23 Vero Beach, Florida
28 Vero Beach, Florida

Zip
24 32962
25 U.S.
29 32968
30 U.S.

4. FEI Number 65-0473209
Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DIMINO, AL
1915 43RD AVE.
VERO BEACH FL 32960

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83 620 Old Dixie Hwy. S.W.
84 City Vero Beach, FL 85 Zip Code 32962

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PT	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DIMINO, AL	1.2 NAME	
STREET ADDRESS	1915 43RD AVE.	1.3 STREET ADDRESS	620 Old Dixie Hwy. S.W.
CITY - ST - ZIP	VERO BEACH FL	1.4 CITY - ST - ZIP	Vero Beach, Florida 32962
TITLE	SV	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DIMINO, KATHY	2.2 NAME	
STREET ADDRESS	1915 43RD AVE	2.3 STREET ADDRESS	620 Old Dixie Hwy. S.W.
CITY - ST - ZIP	VERO BEACH FL	2.4 CITY - ST - ZIP	Vero Beach, Florida 32962
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Al Dimino REQUIRED 3/6/97 (561) 567-7789
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)