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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

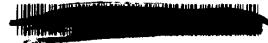
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400047278 1. Corporation Name SOUTH BEACH PIZZA, INC.

Principal Place of Business

Mailing Address

FILED
May 26 1998 8:00am
Secretary of State



•			#	
524 OCEAN ON. 524 OCEAN ON. MIAMI BENCH, FI. 33139 MIAMI BENCH FL 33139			DO NOT WRITE IN THIS SPACE	
2. Principal P	riace of Business Za. Mailing Address		4. FEI Number	Applied For
21 /20	01 ANDORA AV. 26 120/ A	NOONA AV	65-0500372	Not Applicable
Suite, Apt.	#, etc. Suite, Apt. #, etc. 27			\$8.75 Additional Fee Required
City & Stal	AL 6ABLES F1. 28 CONAL 6ABL	43 F/	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 331	Country 7ip	Country 10 DAOE	8. This corporation owes or has paid the curren Personal Property Tax due June 30.	<i>y</i> ~ '
	9. Name and Address of Current Registered Agent	0 0,700	10. Name and Address of New Registered Age	
. 13	Alleren Order	81 Name		
101	Allestos, Audines	\ <u></u>		
7	730 SW 68 TM	82 Street Add	fress (P.O. Box Number is Not Acceptable)	
/	1730 SW 68 Th 1730 SW 68 Th 11AMI, Fl. 33143	83		
M	LIAMI FI. 35/FJ			
	• • /	84 City	FL ^t	35 Zip Code
11. Pureuant	to the provisions of Sections 607 0502 and 607 1508, Florida Statutes	the above-named core		anging its registered
office or I	registered agent, or both, in the State of Florida. Such change was au am familiar with, and accept the obligations of, Section 607.0505, Flori	thorized by the corpora		
SIGNATURE	Signature, typed or printed nume of registered agost and life if applicable (NOTE:	Registered Agent signature requi	ired when reinstating) DATÉ	
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DI	RECTORS IN 12
TITLE	P. A DELETE	1.1 TITLE		Change
NAME	RICARDO MARTINO	1.2 NAME		
STREET ADDRESS	1201 ANSONA AV	1.3 STREET ADDRESS		
CITY - ST - ZIP	CONAL 6AGLES, F1. 33139	1,4 CITY - ST - ZIP		
TITLE	VP.T DELETE	2.1 TITLE		Change
NAME	FABIAN BANUS	2.2 NAME		
STREET ADDRESS	1201 ANDONA AV.	2 3 STREET ADDRESS		
CITY-ST-ZIP	CONAL GASLEY, F1. 33/39	2. 4 CITY-ST-ZIP		
TITLE	DELETE	3.1 TITLE		Change
NAME		3.2 NAME		
STREET ADDRESS		3 3 STREET ADDRESS		
CITY-ST-ZIP		3.4. CITY - ST - ZIP		
TITLE	DELETE	4.1 TITLE		Change
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY - ST - ZIP		
TITLE	DELETE	5.1 TITLE		Change L Addition
NAME		5.2 NAME		Scale
STREET ADDRESS		5.3 STREET ADDRESS		~/\ > \0
CITY-ST-ZIP		54 CITY-ST-ZIP		71
TITLE	☐ DELETE	6.1 1ITLE		Change
NAME	,	6.2 NAME	40000253705 -05/27/9801088022	
STREET ADDRESS	/	6.3 STREET ADDRESS	-U5/21/38U1U88U22	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	***150.00	
14. I hereby of indicated	on this annual report or supplemental annual report if frue and accur	rate and t b# my signatu	Section 119.07(3)(i), Florida Statutes. I further certify use shall have the same legal effect as if made under	nath: that I am an I I
Officer or	director of the corporation of the recenter of trustrie and downed to ex	ecule insteport as req	uired by Chapter 607, Florida Statutes; and that my r	name appears in
Block 12	or Block 13 if changed, or on an attackerent with a yarddress.			į

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