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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Mar 05 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400051157 (3)

MANDARIN PIZZA, INC.

SIGNATURE:

Principal Place of Business Mailing Address				***************************************			
236 SOLANO RD. PONTE VEDRA BEACH FL 32082		236 SOLANO RD. PONTE VEDRA BEACH FL 32082-2297		·			
					3. Date Incorporated or Qualified	3a. Date of Last Report	
2. Principal I	Hace of Business	2a. Mailing Address		·	07/01/1994 4. Fel Number	03/26/1996 Applied For	
21		26			59-3255788	Not Applicable	
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional	
22 27					6. Certificate of Status Desired	Fee Required	
City & Stat	te	City & State			6. Election Campaign Financing	\$5.00 May Be	
Ζιρ	Country	28 Zip	Country		Trust Fund Contribution	Added to Fees	
24	25 29		30	B. This corporation has liability for intangible tax under s. 199.032, Florida Statutes			
F7	9. Name and Address of Curre		100		10. Name and Address of New Re		
DD/	OCK, FREDERICK R		81	Name			
1660 PRUDENTIAL DR.			82	Street Addr	ess (P.O. Box Number is Not Acceptate	ole)	
SUITE 203						*	
	KSONVILLE FL 32207		83				
			84	City	······································	FL 85 Zip Code	
11 Purcuent	Lto the previous of Sections 607.05	02 and 607 1508. Florida Statut	les the above	a-named core	voration submits this statement for the r	Outnose of changing its registered	
office or	registered agent, or both, in the State	le of Florida. Such change was	authorized by	the corporat	poration submits this statement for the price ion's board of directors. I hereby acception's	pt the appointment as registered	
	X Wall I M	Sations of, Section 607.0505, Fi	onua statutes	š.	2/24/9	' >	
SIGNATURE	Signature, typed or printed name of registered &	gent and tide if applicable (NO)	E Registered Age	ent signature requir	ed when reinstating)	DATE	
12.	OFFICERS AI	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC		
THILE	D	L] DELETE	1.1 TITLE		•	Change Addition	
NAME	ALLABEN, DERK L		1.2 NAME				
STREET ADDRESS	200 OCEANO ND.		1.3 STREET	· · ·			
City - ST - 7IP	PONTE VEDRA BEACH FL 32082		1.4 CITY-S	IT-ZIP		Change Addition	
TITLE			21 TITLE			Li Change Li Abbillion	
NAME OTHER ADMOSTS	ALLABEN, KRISTINA G		2.2 NAME 2.3 STREET	ADDDCCC			
STREET ADDRESS O'TY-S1-7/P	EDO OCEMIO NO.	1000	2.3 STREET	1			
TITLE	PONTE VEDRA BEACH FL 32082		3.1 T(TLE	21-FIL	- L.	Change Addition	
NAMÉ			3.2 NAME		1,27	4.4.	
STREET ADDRESS			3.3 STREET	ADDRESS			
CiTY - S1 - 7IP			3.4. CITY-	ST-ZIP			
TITLE	DELETE		4.1 TITLE			Change Addition	
NAME			4, 2 NAME				
STREET ADDRESS			4.3 STREET	ADDRESS		I	
CITY - S1 - 7IP		T DELETE	4.4 CITY - 5	ST-ZIP		Channa Ladden	
THE	☐ DELETE		5.1 TITLE			Change Addition	
NAM!			5.2 NAME	1 1000000			
STREET ADDRESS	.			ADDRESS			
CHY-ST-ZIP THILE	DELETE		5.4 CITY-5 6.1 TITLE	SI-ZIP		Change Addition	
NAME		had breet	6.1 ITTLE 6.2 NAME		•	Emi Cracigo Emi riduladii	
STREET ADDRESS				ADORESS			

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