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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

**DOCUMENT #** 1. Corporation Name

P94000070245 (3)

CORAL WAY REY'S PIZZA, INC.

Principal Place of Business

Mailing Address

SIGNATURE:

APPROVED --AND
FILED

96 MAY -1 PM 1:18

SECRETARY OF STATE TALLAHASSEE, FLORIDA



1036 S.W. 1 ST. Miami Fl 33130		1096 S.W. 1 ST. Miami Fl 33130						
					<ol> <li>Date Incorporated or Qualified 09/23/1994</li> </ol>	3a. Date o	5/01/1	995
2. Principal Place	of Business	2a. Mailing Address			4. FEI Number		<b>├</b> ── <b>┼</b>	Applied For
1 2300 C	ORAL_WAY	26 2300 CORAL WAY			65-0521136			Not Applicable
Suite, Apt. #,	etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		T	Additional Required
City & State		City & State			6. Election Campaign Financing		\$5.00	O May Be
IMA IM	FLORIDA	28 MIAMI FLO	RIDA	\	Trust Fund Contribution			d to Fees
Zip	Country	Zip	}	ountry	8. This corporation has liability for it		under s	199.032,
4 -33145	25 US.	29 33145	30	<u>us.</u>	US Florida Statutes Yes ☐ No  10. Name and Address of New Registered Agent			
	9. Name and Address of Curren	t Hegistereo Agent		R1 Name		<del></del>		
				1 1	DA ANNUAL REPORT S		JES J	INC.
FLORIDA ANNUAL REPORT SERVICES INC.				82 Street Add	ORAL WAY SUITE # 200			
	W. 1ST ST.			83	J CORRES WAT BOTTE " DOG			
MIAMI F	L 33130							
				84 MIAMI	Τ	FL	85 34	3145
11 Durauant to	the provides of Sections 607 0502	and £07 1508. Florida Statut	es the al	<del></del>		<del></del>	1 1	a a fat a sa al a dC a s
or regimerec	agen, or boilt in the State of Florid	da. Such change was authoriz	ed by the	corporation's boa	ration submits this statement for the pur ird of directors. I hereby accept the appo	ointment as r	egistered	l agent. I am
familiar with,	And red etal the oppositional observation	ion 667,0505. Florida Statutes	i. DA (	ANTEDA 1	LOPEZ.PRES			
SIGNATURE	mature, typisd or printed name of registered agent			ed Agent signature require		DATE.		
12.	OFFICERS AND		13	<del>_</del>	ADDITIONS/CHANGES TO OFF	CERS AND	DIRECTO	RS IN 12
TETLE	Р	DELETE	1 '	THE			] Change	Addition
NAME	RODRIGUEZ, RAMON JR.		1.2	NAME				
STREET ADDRESS	3634 N.W. 13TH ST.		1.3	STREET ADDRESS	nnc.	റവ	01:	3563
CITY-ST-ZIP	MIAMI FL 33125		1.4	CITY - ST - ZIP	-05/09	7960	1064	-027
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NAME	RODRIGUEZ, RAMON A		2.2	NAME				
STREET ADORESS	3634 N.W. 13TH ST.		23	STREET ADDRESS				
CITY-ST-ZIP	MIAMI FL 33125		2.4	C-TY-ST-ZIP				
TITLE	T	☐ DELETE		1 TITLE			] Change	Addition
NAME	RODRIGUEZ, MARGARITA		3 2	NAME				
STREET ADDRESS	3634 N.W. 13TH ST.		3.3	STREET ADDRESS				
CITY-ST-ZIP	MIAMI FL 33125			CITY-ST-ZIP				FD 1422-
TITLE		☐ DELETE		1 TIILE		L	Change	Addition Addition
NAME				NAME				
STREET ADDRESS				STREET ADDRESS	١.			
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MILE		DEL E TE		1 TETLE	M BK	L.	_ Grange	☐ YOUNG!
NAME				NAME	$J_{\mathcal{N}}$			
STREET ADDRESS				STREET ADDRESS	<b>y</b> -			
CITY-S1-ZIP		DELETE		I CITY-S1-ZIP 1 TITLE		r	1 Change	☐ Addition
TITLE		L) beet te		NAME			ago	
NAME expect topology				STREET ADDRESS				
STREET ADDRESS				CITY-ST-ZIP				
City-St-ZiP	cortify that the information supplied	with this filing is voluntarily for			for the exemption stated in Section 119	.07(3)(k). Flo	rida Statı	ites. I further
certify that to eath; that to appears in the	he information indicated on this ann am an officer or director of the corp Block 12 or Block 13 if changed, or	ual report or supplemental and orallor, or the receiver or trust on an atlahment with a radio	nual repo eo empov Iress.	rt is true and accur wered to execute the	for the exemption stated in Section 119 rate and that my signature shall have the his report as required by Chapter 607, Fi	same legal lorida Statute	effect as ∋s; and th	if made under nat my name

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR