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

APPROVED AND FILED

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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PROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P94000070245**

1. Corporation Name
CORAL WAY REY'S PIZZA, INC.

Principal Place of Business
2300 CORAL WAY
SUITE 200
MIAMI FL 33145

Mailing Address
2300 CORAL WAY
SUITE 200
MIAMI FL 33145

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
09/23/1994

4. FEI Number
65-0521136

[ ] 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. The corporation owes the current year Intangible Personal Property Tax [ ] Yes [ ] No

2. Principal Place of Business
21 2300 CORAL WAY
Suite, Apt #, etc
22 SUITE # 200
City & State
23 MIAMI FLORIDA
Zip Country
24 33145 25 U.S.

2a. Mailing Address
26 2300 CORAL WAY
Suite, Apt #, etc
27 SUITE # 200
City & State
28 MIAMI FLORIDA
Zip Country
29 33145 30 U.S.

9. Name and Address of Current Registered Agent

FLORIDA ANNUAL REPORT SERVICES INC.
2300 CORAL WAY
#200
MIAMI FL 33145

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] AMADA CANTERA LOPEZ /PRES 4/7/99
Signature, typed or printed name of registered agent and title if applicable

12. OFFICERS AND DIRECTORS

Field	Officer/Director	
TITLE	PD	[ ] DELETE
NAME	RODRIGUEZ, SR., RAMON	
STREET ADDRESS	3634 N.W. 13TH ST.	
CITY-ST-ZIP	MIAMI FL 33125	
TITLE	SD	[ ] DELETE
NAME	RODRIGUEZ, MARGARITA	
STREET ADDRESS	3634 N.W. 13TH ST.	
CITY-ST-ZIP	MIAMI FL 33125	
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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

400002[illegible]1604--3
-05/04/99--01043--013
****150.00 ****150.00

[ ] Change [ ] Addition (for each of entries 1–6: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP)

4/30

14. I 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, with all other like empowered.

SIGNATURE: [signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (1/98)