


SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

APPROVED
AND
FILED

97 SEP 26 PM 2:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P94000079456 (7)

1. Corporation Name
PAPA INTERNATIONAL CORPORATION

Principal Place of Business

5850 LAKEHURST DRIVE
SUITE 205
ORLANDO FL 32819

Mailing Address

5850 LAKEHURST DRIVE
SUITE 205
ORLANDO FL 32819

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Grand National Dr.

Suite, Apt. #, etc.

22 Suite 117

City & State

23 Orlando, FL

Zip

24 32819

Country

25 USA

2a. Mailing Address

26 7081 Grand National Dr

Suite, Apt. #, etc.

27 Suite 117

City & State

28 Orlando, FL

Zip

29 32819

Country

30 USA

3. Date Incorporated or Qualified

10/27/1994

3a. Date of Last Report

05/01/1996

4. FEI Number

59-3277844

Applied For

Not Applicable

6. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible

Personal Property Tax due June 30.

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

RAMPAZO, PAULO R
5533 S ORANGE BLOSSOM TRL., 2B
STE 205 LAKEHURST DR
ORLANDO FL 32839

10. Name and Address of New Registered Agent

81 Name

ROBERTO A. VITTO

82 Street Address (P.O. Box Number is Not Acceptable)

7081 Grand National DR. # 117

83

84 City

Orlando

FL

85 Zip Code

32819

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

09/22/97

DATE

12. OFFICERS AND DIRECTORS

TITLE DPST ☐ DELETE

NAME RAMPAZO, PAULO R
STREET ADDRESS 5533 S ORANGE BLOSSOM TRL., 2B
CITY-ST-ZIP ORLANDO FL 32839

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

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DPST ☒ Change ☐ Addition

1.2 NAME Roberto A. Vitto
1.3 STREET ADDRESS 7081 Grand National Dr. # 117
1.4 CITY-ST-ZIP Orlando, FL 32819

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

***\$550.00 ***\$550.00

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
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 in change, or on an attachment with an address.

SIGNATURE

9/22/97 (407)352-0100

CR2E034 (4/97)