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

PROFIT CORPORATION ANNUAL REPORT

1998

1 11



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000091855 (4)

PUCCI'S PIZZA TOO, INC.

FILED Apr 29 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					1010
1345 WEST AVENUE		950 S. MIAMI AVE C/O BRADSHAW LOTSPEICH PA MIAMI FL 33130 US			
PENTHOUSE SUITE					
MIAMI BEACH FL 33139 US				DO NOT WRITE IN THIS SPACE	
00		03		3. Date Incorporated or Qualified 12/19/1994	
2. Principal P	lace of Business	2a. Mailing Address		4, FEI Number	Applied For
21		26		65-0562463	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the cu	irrent year Intangible
24	25	29	30		Yes No
Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent					
LOTSPEICH, BRADSHAW				rearce (Boito	
			82 Street Add	dress (P.O. Box Number is Not Acceptable)	
MIAMI FL 33130-4121				\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
			[83] 4C) I LINCOLD ROAD	SUHR 5-B
			84 City	(A. Read) FI	85 Zip Code
44 Dureuant	to the provisions of Section (1)	and CA7 1509. Florida State	don the phone period and	iami beach Fl	- 33139
11. Pursuant to the provisions of Sections 607, 9502 and 677, 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both in 77 State of Floria. 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 no obligation of Section 607.0505, Florida Statutes.					
agent. Lam temiliar with, and accept the obligation for .0505, Florida Statutes.					
SIGNATURE Signature typied or printed nary stylegir times grant and title it applicable (NO1E Registered Age			D1F Registered Agent signature requ	4-23-9	}
12,	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE	7,007,1010 I MAGES 10 OF FICE IN THE	Change Addition
NAME	CARLOS, JUAN		12 NAME		_ · · · · ·
STREET ADDRESS	1447-49 WASHINGTON AVE		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI BEACH FL 33139		1.4 CITY- ST- ZIP		
TITLE	PD	DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	PUCCIO, THOMAS		2.2 NAME		_ , _
STREET ADDRESS	1345 WEST AVE PH		2.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI BEACH FL		2. 4 CITY-ST-ZIP		
TITLE		DELETE	3.1 TITLE	Sec //eec	Change Addition
NAME			3.2 NAME	Anthony CARFINO	/ `
STREET ADDRESS			3.3 STREET ADDRESS	Anthony CARFINO 1331 BURDA VISTA DRIVE	1
CITY-ST-ZIP			3.4. CITY-ST-ZIP	MARGATE FC. 33063	
TITLE		DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREFT ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		DELETE	G.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY- \$1-ZIP		
14. I hereby c	ertify that the information supplied witi	this filing does not qualify	for the exemption stated in	Section 119.07(3)(i), Florida Statutes. I further o	ertify 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 or an attachment with an address

4-23-98 305-673-8133