

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Murtham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000092405 (7)

1. Corporation Name

PIZZAZZ PRODUCTIONS, INC.



Principal Place of Business

Mailing Address

~~6742 ATLANTIC BLVD.~~
~~JACKSONVILLE FL 32244~~

~~6742 ATLANTIC BLVD.~~
~~JACKSONVILLE FL 32244~~

2. Principal Place of Business

2a. Mailing Address

21 P.O. Box 19474

26 P.O. Box 19474

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 JACKSONVILLE, FL

28 JACKSONVILLE, FL

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

12/22/1994

3a. Date of Last Report

11/01/1995

4. FEI Number

59-3291949

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. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

SMITH, HULSEY & BUSEY
225 WATER STREET STE. 1800
JACKSONVILLE FL 32202

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 (typed or printed name of registered agent and date of appointment)

(If Filer: Registered Agent Signature required when changing office)

(Date)

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	☐ DELETE
P	THOMAS, DEBORAH L	6742 ATLANTIC BLVD.	JACKSONVILLE FL	☐
VP	GAZDIK, GAYLE T	6742 ATLANTIC BLVD.	JACKSONVILLE FL	☐
				☐
				☐
				☐
				☐
				☐

13. ADDITIONS-CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	2. NAME	3. STREET ADDRESS	4. CITY - ST - ZIP	5. ☐ Change ☐ Addition
	THOMAS, DEBORAH L	P.O. Box 19474	JACKSONVILLE, FL 32245	☒
	GAZDIK, GAYLE T	P.O. Box 19474	JACKSONVILLE, FL 32245	☒
				☐
				☐
				☐
				☐
				☐

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.04(3)(d), 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 and Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Deborah L Thomas*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/96 904 721-7755
Date Daytime Phone

CR2E034 (12/95)