

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.  
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1999**



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

DOCUMENT # **P95000038323**

1. Corporation Name

"BRANDON PIZZA GROUP, INC."

Principal Place of Business

15310 AMBERLY DR.  
110  
TAMPA FL 33647  
US

Mailing Address

15310 AMBERLY DR.  
110  
TAMPA FL 33647  
US

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

24

Country

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

29

Country

30

9. Name and Address of Current Registered Agent

DORSCH, DANIEL J  
16057 TAMPA PALMS BLVD  
SUITE 101  
TAMPA FL 33647

3. Date Incorporated or Qualified

05/15/1995

4. FEI Number

59-3316160

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 owes the current year  
Intangible Personal Property. ☒ Yes ☐ No

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME DORSCH, DANIEL J  
STREET ADDRESS 15310 AMBERLY DR., STE. 110  
CITY-ST-ZIP TAMPA FL

TITLE ☐ DELETE

NAME DIMALANTA, EDWIN P  
STREET ADDRESS 16007 WILMINGTON PLACE  
CITY-ST-ZIP TAMPA FL-33647

TITLE ☐ DELETE

NAME DIMALANTA, PERRY P  
STREET ADDRESS 5805 E. AINSWORTH CT.  
CITY-ST-ZIP TAMPA FL 33647

TITLE ☐ DELETE

NAME ZETTEL, JOHN T  
STREET ADDRESS 15310 AMBERLY DR SUITE 110  
CITY-ST-ZIP TAMPA FL 33647

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 ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS 15310 Amberly Dr. Suite 320

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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.

SIGNATURE: JOHN T. ZETTEL

8/20/99

813-972-2823

FILED  
Aug 25, 1999 8:00 am  
Secretary of State

08-25-1999 90002 038 \*\*\*550.00



DO NOT WRITE IN THIS SPACE

CR2E034 (5/99)