## **'2004 UNIFORM BUSINESS REPORT (UBR)**

## FILED May 16, 2001 8:00 am Secretary of State

## DOCUMENT # P95000049932

R&T Pizza Management #1, INC.					05-16-2001 90250 037 ***150.00			
	•••			4				
unit .	Santa Barbara Blvd 5, &6 s, FL 34116	OUTL 2	Barbara 34116	Blvd.	MANEZIG	1941/mi 1962 34/	1 MILT 188	
2. Principal	Place of Business	3. Mailing Address	•		•			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
City & State		City & State		4. FEI	1 05-0593257		pplied For ot Applicable	
Zip	Country	Zip	Country	<b>5</b> . Ce	rtificate of Status Desired	\$8.75 Ad	ditional	
6. Name and Address of Current Registered Agent			1	7. Name and Address of New Registered Agent				
Moore	, Robert J.	<u> </u>	Mass	e,Rober				
623 104th Ave. N.								
Naples, FL 34108			Street A	Street Address (P.O. Box Number is Not Acceptable)				
			1147	1147 Inperial Dr.				
	A/A	Napl	Naples FL 34110					
8. The above	e named entity submits this statement fol	the purpose of changing its	registered office or	registered agent	, or both, in the State of Florid	a. // /	,	
SIGNATURE	x //W/C1/	me !	//		У	4/16/2	100/	
	Signature, I pub or printed name of registered agents	d title if applicable. (NOT	E: Registered Agent signatu	re required when reinst	ating)	'DATE /		
Tax filing	oration is eligible to satisfy its Intangible requirement and elects to do so.		III FEE IS \$150.0 001 Fee will be \$5 ble to Department	50.00	<ol><li>Election Campaign Finan Trust Fund Contribution.</li></ol>	~ ~~	00 May Be d to Fees	
11.	OFFICERS AND I		12.		TIONS/CHANGES TO OFFICE	RS AND DIRECTOR	S IN 11	
TITLE	VP	☐ Delete	TITLE	,,,,,,,,	110110701111111111111111111111111111111	☐ Change	Addition	
NAME	Comeriato, Anthor		NAME			_	_	
STREET ADDRESS	41 Mentor Drive	<del>-</del>	STREET ADDRESS					
CITY-ST-ZIP	Nap <sup>2</sup> es, FL 34110	,	CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Moore, Robert J. 623 104th Ave. N Naples, FL 34108		TITLE NAME STREET ADDRESS CITY-ST-ZIP	1147 Im	Robert J. perial Dr. FI. 34110	Change	Addition	
TITLE	-S		TITLE -	-S	111 01110	- Change	Addition	
	Moore, Deborah		NAME	Moore, D	eborah			
			STREET ADDRESS					
				Naples,	FL 34110	F7 A.		
	-	☐ Delete				☐ Change	☐ Addition	
			STREET ADDRESS					
	1	)	CITY-ST-ZIP					
FITLE		☐ Delete	TITLE	<del></del>		Change	☐ Addition	
NAME		•	NAME					
			STREET ADDRESS			,		
		∟ Delete				∟_ Change	☐ Addition	
		. /	STREET ADDRESS		• *			
	1		CITY 57-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Moore, Deborah 623 104th Ave. N. Naples, Fl 34108 T Comeriato, Janet 41 Mentor Drive	Delete  Delete  Delete	TITLE  NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS	S Moore,D 1147 Im	FL 34110 eborah perial Drive FL 34110	☐ Change	☐ Additi	

of the corporation or the receiver o changed, or on an attachment with