

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # P95000068669 (7)

1. Corporation Name
MOORE PIZZA, INC.



Principal Place of Business: C/O HOLLAND AND KNIGHT, 315 S. CALHOUN ST., SUITE 600, TALLAHASSEE FL 32301
Mailing Address: C/O HOLLAND AND KNIGHT, 315 S. CALHOUN ST., SUITE 600, TALLAHASSEE FL 32301

3. Date Incorporated or Qualified: 09/06/1995
3a. Date of Last Report: n/a
4. FFI Number: 58-2206845
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

2. Principal Place of Business: 21 Cross Creek Square, Suite, Apt. #, etc.: # D & E, 22 Tallahassee, Florida, Zip: 32301, Country: Leon
2a. Mailing Address: unit we made in may '96, 26 14907 Easingwood, Suite, Apt. #, etc.: #, 27 Houston, Texas, Zip: 77015, Country: Harris

9. Name and Address of Current Registered Agent: CORPORATION SERVICE COMPANY, 1201 HAYS STREET, TALLAHASSEE FL 32301
10. Name and Address of New Registered Agent: 81 Name: Yvonne Dowling, V.P., 82 Street Address (P.O. Box Number is Not Acceptable): Rt. 17 Box 1442-C - Dempsey Mayo Road, 83, 84 City: Tallahassee, FL 85 Zip Code: 32308

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: Yvonne Dowling, Yvonne Dowling, Vice President, 4/4/96

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: D	<input type="checkbox"/> DELETE	1. 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: DOWLING, WENDELL L JR.		12 NAME	
STREET ADDRESS: ROUTE 17, BOX 1442-C, DEMPSEY MAYO ROAD		13 STREET ADDRESS	
CITY-ST-ZIP: TALLAHASSEE FL 32308		14 CITY-ST-ZIP	
TITLE: D	<input type="checkbox"/> DELETE	2. 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: DOWLING, YVONNE M		22 NAME	
STREET ADDRESS: ROUTE 17, BOX 1442-C, DEMPSEY MAYO ROAD		23 STREET ADDRESS	
CITY-ST-ZIP: TALLAHASSEE FL 32308		24 CITY-ST-ZIP	
TITLE:	<input type="checkbox"/> DELETE	3. 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:		32 NAME	
STREET ADDRESS:		33 STREET ADDRESS	
CITY-ST-ZIP:		34 CITY-ST-ZIP	
TITLE:	<input type="checkbox"/> DELETE	4. 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:		42 NAME	
STREET ADDRESS:		43 STREET ADDRESS	
CITY-ST-ZIP:		44 CITY-ST-ZIP	
TITLE:	<input type="checkbox"/> DELETE	5. 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:		52 NAME	
STREET ADDRESS:		53 STREET ADDRESS	
CITY-ST-ZIP:		54 CITY-ST-ZIP	
TITLE:	<input type="checkbox"/> DELETE	6. 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:		62 NAME	
STREET ADDRESS:		63 STREET ADDRESS	
CITY-ST-ZIP:		64 CITY-ST-ZIP	

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 119.07(3)(k), 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: Yvonne Dowling, Yvonne Dowling V.P., 4/4/96, 713/754-4746

CR2E034 (12/95)