

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mo'ham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000073801 (9)

1. Corporation Name

MARIO'S PIZZA EXPRESS INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

96 AUG 27 PM 2:22



Principal Place of Business

3900 NORTHLAKE BLVD.
PALM BEACH GARDENS FL 33410

Mailing Address

3900 NORTHLAKE BLVD.
PALM BEACH GARDENS FL 33410

3. Date Incorporated or Qualified

09/22/1995

3a. Date of Last Report

2. Principal Place of Business

21 3900 Northlake Blvd.

2a. Mailing Address

26 3900 Northlake Blvd

Suite, Apt. #, etc

Suite, Apt. #, etc

4. FEI Number

65-0609950

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 ☐

9. Name and Address of Current Registered Agent

MULE, MARIO
3900 NORTHLAKE BLVD.
PALM BEACH GARDENS FL 33410

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 607.1506, 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. Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Signature of the person making this statement (not required if agent and director)

(If the Registered Agent's signature is required, attach here)

August 5, 1996

12. OFFICERS AND DIRECTORS

TITLE Pres.
NAME MARIO M. MULE
STREET ADDRESS 3900 Northlake Blvd.
CITY-ST-ZIP Palm beach Gardens, Fl. 33410

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE Pres.
12 NAME MARIO M. MULE
13 STREET ADDRESS 3900 Northlake Blvd.
14 CITY-ST-ZIP Palm beach Gardens, Fl. 33410

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

10000193895.1

-09/04/96--01161-018 Addition

****225.00 ****225.00

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

August 5, 1996 (407)624-1822

CR2E034 (3/96)