## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998

SIGNATURE:

## **FILED** Jan 28 1998 8:00am FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State Secretary of State DIVISION OF CORPORATIONS

TOOSOME'S PIZZA, INC.  Principal Place of Business 743 HidHWAY 98 EAST, SUITE 5 DESTIN FL 32541  2. Principal Place of Business 2. Mailing Address 743 HidHWAY 98 EAST, SUITE 5 DESTIN FL 32541  2. Principal Place of Business 2. Mailing Address 2. Principal Place of Business 2. Mailing Address 3. Date Incorporated or Qualified 10/10/1995  4. FEI Number Suite, Apt. #, etc. 27 Dity & State 28 Destines of Status Dealed Status Dealed Received Received Fee Required F
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Principal Place of Business  Additing Address  2a. Mailing Address  2b STIN FL 32541  2b STIN FL 32541  2c Principal Place of Business  2a. Mailing Address  2b Mailing Address  2c Street Address of New Registered Agent  2c Street Address of New Registered Agent  2c Street Address (P.O. Sox Number is Not Acceptable)  2c Street Address (P.O. Sox Number is Not Acceptable)  2c Street Address (P.O. Sox Number is Not Acceptable)  2c Street Address (P.O. Sox Number is Not Acceptable)  2c Street Address (P.O. Sox Number is Not Acceptable)  2c Street Address (P.O. Sox Number is Not Acceptable)  2c Street Address (P.O. Sox Number is Not Acceptable)  2c Street Address (P.O. Sox Number is Not Acceptable)  2c Street Address (P.O. Sox Number is Not Acceptable)  2c Street Address (P.O. Sox Number is Not Acceptable)  2c Street Address (P.O. Sox Number is Not Acceptable)  2c Street Address (P.O. Sox Number is Not Acceptable)  2c Street Address (P.O. Sox Number is Not Acceptable)  2c Street Address (P.O. Sox Number is Not Accept
Principal Place of Business  Addition Address  2a. Mailing Address  2b STIN FL 32541  2b STIN FL 32541  2c Principal Place of Business  2a. Mailing Address  2b Mailing Address  2c Street Address of New Registered Agent  2c Street Address of New Registered Agent  2c Street Address (P.O. Sox Number is Not Acceptable)  2c Street Address (P.O. Sox Number is Not Acceptable)  2c Street Address (P.O. Sox Number is Not Acceptable)  2c Street Address (P.O. Sox Number is Not Acceptable)  2c Street Address (P.O. Sox Number is Not Acceptable)  2c Street Address (P.O. Sox Number is Not Acceptable)  2c Street Address (P.O. Sox Number is Not Acceptable)  2c Street Address (P.O. Sox Number is Not Acceptable)  2c Street Address (P.O. Sox Number is Not Acceptable)  2c Street Address (P.O. Sox Number is Not Acceptable)  2c Street Address (P.O. Sox Number is Not Acceptable)  2c Street Address (P.O. Sox Number is Not Acceptable)  2c Street Address (P.O. Sox Number is Not Acceptable)  2c Street Address (P.O. Sox Number is Not Accept
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DO NOT WRITE IN THIS SPACE   3. Date Incorporated or Qualified   10/10/1995   10/10/1995   2. Principal Place of Business   2a. Mailing Address   4. FEI Number   Applied For   12   25   Suite, Apt. #, etc.   25   Suite, Apt. #, etc.   5. Certificate of Status Desired   \$8.75 Additional Fee Required   Fe
10/10/1995   2   11/10/1995   3   3   4   FEI Number   59/3344126   Not Applicable   59/3344126   Not Applicable   59/3344126   Suite, Apt. #, etc.   27   Suite, Apt. #, etc.   27   Suite, Apt. #, etc.   5   Suite, Apt. #, etc.   6   Suite, Apt. #, e
2. Principal Place of Business
Suite, Apt. #, etc. Suite,
Suite, Apt. #, etc.    Suite, Apt. #, etc.   Suite, Apt. #, etc.   Suite, Apt. #, etc.   Site   Site
City & State  Country  Added to Fees  A
City & State    City & State     City & State
Zip   Country   Zip   Country   Zip   Country   St. Triust Fund Contribution   Added to Fees
Zip Country Zip Country Zip Country 8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30.
29 30 Personal Property Tax due June 30. Yes No.  9. Name and Address of Current Registered Agent  OWEN, DAVID A 743 HIGHWAY 98 EAST, SUITE 5 DESTIN FL 32541  182 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 agent, and accept the obligations of, Section 607,0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, 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 dignature required when reharating)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  PST GUNAY, CLAY  743 HIGHWAY 98 EAST, SUITE 5 13 STREET ADDRESS CITY-ST-ZIP  DELETE  11. TITLE  DELETE  21. TITLE  DELETE  21. TITLE  DELETE  21. TITLE  Addition  NAME SIREET ADDRESS CITY-ST-ZIP  29. STREET ADDRESS CITY-ST-ZIP  20. Change Addition  Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 40 Change Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND ADDITIONS/CHANGES TO OFFIC
9. Name and Address of Current Registered Agent  OWEN, DAVID A 743 HIGHWAY 98 EAST, SUITE 5 DESTIN FL 32541  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 lamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature. Typed or printed name of registered agent and title if applicable.  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  ITILE  SIGNAY, CLAY  743 HIGHWAY 98 EAST, SUITE 5  DESTIN FL 32541  DELETE  DELETE  1.1 ITILE  Change  Addition  NAME  SIRET ADDRESS  CITY-ST-ZIP  DELETE  2.1 ITILE  Change  Addition  ADDITIONS/CHANGES  CITY-ST-ZIP  DELETE  2.3 STREET ADDRESS  CITY-ST-ZIP  Addition  ADDITIONS/CHANGES  CITY-ST-ZIP  Addition
OWEN, DAVID A 743 HIGHWAY 98 EAST, SUITE 5 DESTIN FL 32541  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 and title if applicable.  SIGNATURE  Signature, typed or printed name of registered agent and title if applicable.  NOTE: Registered Agent signature required when rehastating)  DATE  12. OFFICERS AND DIRECTORS IN 12  TITLE  PST  GUNAY, CLAY  743 HIGHWAY 98 EAST, SUITE 5  1.3 STREET ADDRESS  CITY-ST-ZIP  DELETE  1.1 TITLE  1.2 NAME  STREET ADDRESS  CITY-ST-ZIP  DELETE  2.1 TITLE  1.3 STREET ADDRESS  CITY-ST-ZIP  Change  Addition  Addition  NAME  STREET ADDRESS  CITY-ST-ZIP  2.3 STREET ADDRESS  CITY-ST-ZIP  Change  Addition
743 HICHWAY 98 EAST, SUITE 5 DESTIN FL 32541  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 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  SIGNATURE  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  PST  GUNAY, CLAY  743 HIGHWAY 98 EAST, SUITE 5  1.3 STREET ADDRESS  CITY-ST-ZIP  DELETE  1.4 CITY-ST-ZIP  Change  Addition  Addition  NAME  SIREET ADDRESS  CITY-ST-ZIP  2.2 NAME  SIREET ADDRESS  CITY-ST-ZIP  2.3 STREET ADDRESS  CITY-ST-ZIP  2.4 CITY-ST-ZIP
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