

NOTE: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P95000081457 (0)

1. Corporation Name

FORT MYERS PIZZA SYSTEMS, INC.

Principal Place of Business

100 S.E. 2ND STREET
SUITE 3940
MIAMI FL 33131

Mailing Address

100 S.E. 2ND STREET
SUITE 3940
MIAMI FL 33131-2148

3. Date Incorporated or Qualified
10/24/1995

3a. Date of Last Report
04/29/1996

2. Principal Place of Business

21 4125 CLEVELAND Ave

Suite, Apt. #, etc.
#99

22 City & State
FORT MYERS, FL

23 Zip
33901

24 Country
25

2a. Mailing Address

26 Suite, Apt. #, etc.
SUITE 2620

27 City & State

28 Zip

29 Country
30

4. FEI Number
65-0614262

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

WEINKLE, BARNEY N
100 S.E. 2ND ST.
SUITE 3940
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name
SMOLER, BRUCE J
82 Street Address (P.O. Box Number is Not Acceptable)
83 SUITE 2620
84 City
FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0503 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)

Signature, typed or printed name of registered agent and title (if applicable)

4/20/97

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
D	SMOLER, BRUCE J.	100 S.E. 2ND STREET, SUITE 3940	MIAMI FL 33131

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP
	WEINKLE, BARNEY	SUITE 2620	
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 do 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/1/97

(305) 531-9144

0176478

CR2E034 (9/96)