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FILED  
May 11 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000006338 (3)

1. Corporation Name  
MADISON PIZZA, INC.

Principal Place of Business

1203 WEST BASE ST  
MADISON FL 32340  
US

Mailing Address

KAZBOUR MANAGEMENT  
2503 HWY 60 EAST  
VALRICO FL 33594  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/17/1996

4. FEI Number

59-3357844

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25 29 30

9. Name and Address of Current Registered Agent

NYMARK, DENNIS V  
110 S PEBBLE BEACH BLVD  
SUN CITY CENTER FL 33573

10. Name and Address of New Registered Agent

81 Name

DALA D. Satterly

82 Street Address (P.O. Box Number is Not Acceptable)

3221 Crystal Hills Loop S.

83

84 City

Lakeland

FL

85 Zip Code

33801

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 *Dala D. Satterly* DALA D. Satterly

1-27-98

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☒ DELETE

NAME DPS  
STREET ADDRESS KAZBOUR, TARAK A  
CITY-ST-ZIP 2430 US 92 E  
LAKELAND FL 33801

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME President  
1.3 STREET ADDRESS Mark A. Schroeder  
2953 Countryridge Lane  
1.4 CITY-ST-ZIP Lakeland, FL 33801

2.1 TITLE ☐ Change ☒ Addition

2.2 NAME Vice President  
2.3 STREET ADDRESS Keith A. Schroeder  
832 E. Cherry ST.  
2.4 CITY-ST-ZIP Perry, FL 32347

3.1 TITLE ☐ Change ☒ Addition

3.2 NAME 2nd Vice President  
3.3 STREET ADDRESS David A. Schroeder  
1115 E. Julia ST.  
3.4 CITY-ST-ZIP Perry, FL 32347

4.1 TITLE ☐ Change ☒ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I 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: *Mark Schroeder*

4-30-98

CR2E034 (10/97)