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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 13 1997 8:00am

Secretary of State

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## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## POCUMENT # P96000010781 (8)

SMOKY MOUNTAIN PIZZA, INC.

Principal Place of Business Mailing Address								i (CP) (CO)		VB111 18 0 81 16181	1 1101 1001
2274 TONIWOO PALM HARBOR		2274 TONIWOOD LANE PALM HARBOR FL 34685-2225									
								3. Date incorporated or Qualified 01/31/1996	3a. D	ate of Last R	ieport
2. Principal Place of Business 2a. Mailing Address								4. FEI Number		<b>X</b> Ap	oplied For
21			26	26							ot Applicable
Suite, Apt.	#, etc.		Su	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75	Additional
22	<del></del>		27	. oo∮ ka Barana iyan ka ahaan ahaan ka barana ka ahaan ka ahaan ka ahaan ka baran ka baran ka baran baran baran				5. Certificate of Status Desired		Fee Re	equired
City & State	Ө		Cit	City & State				6. Election Campaign Financing		\$5.00	May Be
23			1 1	[28]				Trust Fund Contribution Added to Fees			
	Zip Country			Zip Country			,	This corporation has liability for intangible tax under s. 199.032,     Florida Statutes			
24	25 25 Name and Address of Curren			29 30 30 Begistered Agent				Florida Statutes L Yes L No  10. Name and Address of New Registered Agent			
000	<del></del>		ont riogratore	ou Agoin		81	Name	ty. Name and Address of New P	ogisteleu	Ageill	
COSTELLO, JOSEPH 2274 TONIWOOD LANE											
						82	Street Addr	ss (P.O. Box Number is Not Acceptable)			
PALM HARBOR FL 348						83		er termengen som fige 1,4 i s. i samm fom 14. 312 mannet for 1.444 mannet for 14. 14. 14. 14. 14. 14. 14. 14. 14. 14.			
						84	City			85 Zip (	Code
						L			<u>Fl</u>	.   `	
11. Pursuant : office or ri agent. La	to the provis egistered aç m familiar w	ions of Sections 607.0 jont, or both, in the Sta ith, and accept the obl	502 and 607. te of Florida. igations of, Sc	1508, Florida Sta Such change w action 607.0505	atules, the a as authorize , Florida Sta	bovi d by tutes	e-named corp y the corporat s.	poration submits this statement for the ion's board of directors. I hereby acc	purpose o ept the app	f changing it pointment as	s registered registered
SIGNATURE											
	Signature, types	or printed name of registered	the second second second			d Age	int signature requir	ed when reinstating)	DATE		
12.	<u> </u>	OFFICERS /	ND DIRECTO		18.			ADDITIONS/CHANGES TO OFF	ICERS AN		
TITLE	COSTELL	U IUGEBH		[]] DELETE	1.11					L Change	Addition
NAME COSTELLO, JOSEPH STREET ADDRESS 2274 TONIWOOD LANE				1.2 NAME							
STREET ADDRESS		ARBOR FL 348					ADDRESS				
CITY-ST-ZIP TITLE	V	ALDON I E 040		DELFIE	2.11		S1 - ZIP	er som englister ex imperementationer en princes destablished and about a section		Change	Addition
NAME	DELUCIA	, EUGENE R III		L been	2.7 I					onengo	L Addition
STREET ADDRESS 4543 SO. MANHATTAN AVENU			NUF				ADDRESS				
CITY-ST-ZIP	TAMPA F				1		\$1.ZIP				
TITLE	ST			DELFTE	311		VI 40			Change	Addition
NAME		R, DAVID		•	3 2 N						
STREET ADDRESS		ORS PLACE			3.3 \$	TREET	ADORESS				
CITY-ST-ZIP	TAMPA F	FL 33615			34 (	00 Y - 3	SI-ZIP				
TOTLE				☐ DELETE	4.1 T				<del></del>	☐ Change	Addition
NAME					4.21	MAME.					
STREET ADDRESS					4.3 S	TREET	ADDRESS				
CITY-ST-ZIP					4.4.0	HY-5	ST-21P	a		· • • • • • • • • • • • • • • • • • • •	
TOTLE				DELETE	5.1 T	HLF				Change	Addition
NAME					5.2 N	AME					
STREET ADDRESS					5.3 S	TREET	ADDRESS				
CITY-ST-ZIP			·····				51-2IP				
TITLE				DELETE	6.1 1					Change	Addition
NAME					6.2 N						
STREET ADDRESS					6.3 S	TREET	ADDRESS				

14. I do hereby certily 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 eath; 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