

2004 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
Apr 05, 2004 08:00 AM
Secretary of State

DOCUMENT # P96000010781

1. Entity Name
SMOKY MOUNTAIN PIZZA, INC.



Principal Place of Business
3342 S WESTSHORE BLVD
TAMPA, FL 33629 US

Mailing Address
2274 TONWOOD LANE
PALM HARBOR, FL 348



01092004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3362735

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

COSTELLO, JOSEPH
2274 TONIWOOD LANE
PALM HARBOR, FL 348

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME COSTELLO, JOSEPH
STREET ADDRESS 8303 COORS PLACE
CITY-ST-ZIP TAMPA, FL 33615

TITLE STD
NAME CONOVER, DAVID
STREET ADDRESS 8303 COORS PLACE
CITY-ST-ZIP TAMPA, FL 33615

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
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NAME
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CITY-ST-ZIP

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04/05/04-80053-010 150.00

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IN THIS SPACE**

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Joseph A. Costello
JOSEPH A. COSTELLO

2/3/04 813-920-7383
Date Daytime Phone #