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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P96000016248 (2) DOCUMENT

LOUISE'S PIZZA & RESTAURANT, INC.

rincipal Place of Business	Mailing Address
3408 SOUTH ATLANTIC AVENUE	3408 SOUTH ATLANTIC AVENUE
DAYTONA BEACH SHORES FL 32118	DAYTONA BEACH SHORES FL 32119

FILED Mar 16 1998 8:00am Secretary of State

DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/19/1996 4. FEI Number Applied For 21 26 59-3363714 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 \$5.00 May Be City & State City & State 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Zip Country Zip Country a. This corporation owes or has paid the current vear Intangible □ Ño Personal Property Tax due June 30. 24 25 29 30 Yes g. Name and Address of Current Registered Agent Name and Address of New Registered Agent APPIO, DOMINICK F 81 3630 SOUTH CENTRAL AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) FLGLER BEACH FL 32136 83 84 City 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. 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 (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 1.1 TITLE APPIO, DOMINICK F 1.2 NAME 3630 SOUTH CENTRAL AVE STREET ADDRESS 1.3 STREET ADDRESS FLGLER BEACH FL 32136 1.4 CITY - ST- ZIP CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE APPIO. ANDREW A 2.2 NAME NAME 1422 NORTH CENTRAL AVE STREET ADDRESS 2.3 STREET ADDRESS FLGLER BEACH FL 32136 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 31 TITLE APPIO, CAROLYN A NAME 3.2 NAME 1422 NORTH CENTRAL AVE STREET ADDRESS 3.3 STREET ADDRESS FLGLER BEACH FL 32136 CITY-ST-ZIP 3.4. CITY-ST-ZIP Addition DELETE Change TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-7IP

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.