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

PROFIT CORPORATION ANNUAL REPORT

1997



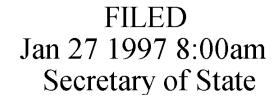
FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000027754 (6)

MAMMA MIA PIZZA & RESTAURANT OF LAKE WORTH, INC.



Principal Plac	e of Business	Mailing Address		· ————————————————————————————————————				
7667 LAKE WORTH RD LAKE WORTH FL 33467 7667 LAKE WORTH FL 33467			i34					
					 Date Incorporated or Qualifie 03/20/1996 	d 3a. Date	of Last Re	port
· ·	Place of Business	2a. Maiting Address			4, FEI Number			olied For
Suite, Apt.	th nto	Suite, Apt #, etc.			162-0664060	•		Applicable
22	#, Otc.	27			5. Certificate of Status Desired		\$8.75 A	
City & Stat	te	Cily & State		······································	6. Election Campaign Financing		\$5.00	`
23		28			Trust Fund Contribution		Added to	
Zιρ	Country	Zip	Cou	ntry	8. This corporation has liability f			199.032,
24	25	29	30		Florida Statutes	Yes		
	9. Name and Address of Curr	rent Registered Agent		81 Name	10. Name and Address of New	Registered Ag	ant	
	GRASSO, FRANCESCO			81 Name				
9858 MAJESTIC WAY				82 Street Address (P.O. Box Number is Not Acceptable)				
BO1	YNTON BEACH FL 33437		ļ	83				
ł			i					
				84 City		FL	85 Zip C	ode
11. Pursuant	to the provisions of Sections 607.0	502 and 607,1508, Florida Statut	es, the at	ove-named o	corporation submits this statement for th		nanging its	registered
office or l	registered agent, or both, in the Sta am familiar with, and accept the ob	ite of Florida. Such change was a ligations of, Section 607.0505. Flo	authorizer orida Stat	by the corportes.	corporation submits this statement for the oration's board of directors. I hereby ac-	cept the appoin	itment as r	egistered
SIGNATURE	•	14						
	Signature, typed or pointed hame of registered			Agent signature r	equired when reinstating)	DATE		
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OF			
THILE	D LENA LEONADOO	[_] DELETE	1.1 Tr			Ļ	_i Change	Addition
NAME OTRES LODGES	LENA, LEONARDO 7667 LAKE WORTH RD		1.2 NA	REET ADORESS]
STREET ADDRESS	LAKE WORTH FL 33467			1				\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
GITY - ST - ZIP TITLE	D	DELETE	2.1 Ti	TY-ST-ZIP			Change	Addition
NAME	LOGRASSO, FRANCESCO	ما معدد الله	2.2 N/	Y		_	g	
STREET ADDRESS	9856 MAJESTIC WAY			REET ADDRESS				
CITY-ST-ZIP	BOYNTON BEACH FL 33437	7		TY-ST-ZIP		ें स		ĺ
TITLE		DELETE	3.1 (1)			L	Change	Addition
NAME			3.2 N	ME				1
STREET ADDRESS			3.3 ST	REET ADDRESS				Į
CITY ST - ZIF	<u></u>	······································		TY - ST - ZIP				
TITLE		☐ DEL.ETE	4.1 TI			L] Change	Addition
NAME			4. 2 N	1				ļ
STREET ADDRESS				reet address				
CITY-ST-ZIP		DELETE		TY-ST-ZIP			Change	Addition
TITLE	1	EJ DELETE	51 TI	1		L	CHARRE	LI MOUNDA
NAME .			52 N/	REET ADDRESS				ļ
STREET ADDRESS CITY-ST-ZIP	y programa de de	الأوجاد بشواء والمجارية		TY-ST-ZIP				
TITLE	 	DELETE	6.1 T/			Т	Change	Addition

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 of 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 of t

6.2 NAME

SIGNATURE:

NAME STREET ADDRESS

1-18-91

561-969-1300

0331240