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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P96000067745**1. Corporation Name

DE LOSA'S PIZZA & RESTAURANT OF PASADENA, INC.

Principal Place	of Business	M	ailing Address					1 10 011 0 01 110 1E11	A Estat Barat Katur an				01 3 111 1001
12801 GULF BL			BO1 GULF BLVD., E.										
MADEIRA BEACH FL 33708 MADEIRA BEACH FL 33708								50	NOT WOITE	N THIC	CDACE		
	•						ŀ	Date Incorporated	O NOT WRITE I	N IHIS	SPACE	-	
						,		08/14/1996	OI QUAINEG				
2 Principal Pi	ace of Business	2a.	. Mailing Address					4. FEI Number	,		 :	Applie	ed For
21	acc of Business	26						59-3399472		_	_ H	Not A	pplicable
Suite, Apt.	#, etc.	1201	Suite, Apt. #, etc.			-,		5. Certifcate of Status	Desired [\$8.7		
22		27						5. Certificate of Status	Desired L		Fee	Requ	ired
City & State	9		City & State				j	Election Campaign		1)0 Ma	
23	*	28						Trust Fund Contrib				ed to F	ees
Zip	Country	Ь	Zîp		untry			8. This corporation ov		-	ingible □Yes		lno l
24	25	29	tored Agent	30	Т			Personal Property 10. Name and Address					
	9. Name and Address of Currer	it Kegis	stered Agent		81	Name				0.0100	<u>.go</u>		
Broaderick, Kenneth C						Bro	<u>ader</u>	ick, Kenneth	<u>C.</u>				
12801 GULF BLVD., E.					82	Street 128	Addres	s (P.O. Box Number is illage Blvd.	Not Acceptable)			}
MAD	EIRA BEACH FL 33708				83	120	<u>01 v</u>	TITAGE DIVA.	Last				
									 .	•	Tabl 4		
					84	City Made	eira	Beach	•	FL		ip Cod 337	
11. Pursuant	to the provisions of Sections 607.050	2 and 6	607.1508, Florida Stat	utes, the	above	-named	corpora	ation submits this stater	nent for the pur	pose of c	hanging	its re	gistered
office or re	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florid	da. Such change was	authorize	id by	the corp	oration'	s board of directors. I h	ereby accept th	e appoin	itment as	regis	terea
SIGNATURE	The same and same asset and same		,										<i>:</i>
SIGNATURE	Signature, typed or printed name of registered age			TE: Registere	d Agen	t signature	required w	nen reinstating)		DATE			
12.	OFFICERS AN	ID DIRE		13			1	ADDITIONS/CHANG	SES TO OFFIC	ERS AN	D DIREC		Addition
TITLE	PST PROMPERIOR MEMBERS C		☐ DELETE		ITLE		PST				E4 Cilari	ye	[] Addition
NAME	BROADERICK, KENNETH C			l	AME			aderick, Kenr					Į
STREET ADDRESS	12801 GULF BLVD., E. MADEIRA BEACH FL					ADDRESS	JIZ01	01 Village Bl	vd. East	2			}
CITY-ST-ZIP	MADEINA BEACH FE		□ DELETE	2.11	ATY-ST	-ZIP	Made	eira Beach, I	L- <u>3</u> 3708		☐ Chan	ge,	. Addition
TITLE NAME					IAME							-	_
STREET ADDRESS						ADDRESS							
CITY-ST-ZIP					CITY-S								
TITLE			☐ DELETE	_	TITLE			-A#TTT			☐ Chan	ge	Addition
NAME				3.21	LAME								
STREET ADDRESS				3.3 5	STREET	ADDRESS	İ						
CITY-ST-ZIP				3.4,	CITY-S	T-ZIP							
TITLE			☐ DELETE	4.1 7	TITLE						☐ Chan	ge	☐ Addition
NAME				4. 2	NAME				•				•
STREET ADDRESS				4.3 \$	STREET	ADDRESS							
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TITLE			☐ DELETE		TITLE						Chan	ge	Addition
NAME				4	MAME								ļ
STREET ADDRESS				1		ADDRESS							
CITY-ST-ZIP					CITY- ST	T-ZIP							- Adres
TITLE				■ 6.11	ITTLE		1				☐ Chan	ge	Addition

14. 1 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, with all other like empowered.

6.2 NAME

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

February 10, 1999