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1997 OCT -6 AM 9:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT
CORPORATION
ANNUAL REPORT
Amended 1997 Amended

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96-00084370

1. Corporation Name
SAL'S POPPA PIZZA, INC.

Principal Place of Business	Mailing Address
417 E. Boynton Bch. Blvd Boynton Beach, Florida 33445	1914 Palmland Dr. #C Boynton Beach, Florida 33436

3. Date Incorporated or Qualified: October 9, 1996	3a. Date of Last Report: 1997 ANN. RPT.
4. FEI Number: 65-0702660	☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☑ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21 Same	26 Same
Suite, Apt. #, etc 22 Same	Suite, Apt. #, etc 27 Same
City & State 23 Same	City & State 28 Same
Zip: 24 Same / Country: 25 Same	Zip: 29 Same / Country: 30 Same

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
PHYLLIS SCALZO 1914-C Palmland Drive Boynton Beach, Florida 33436	81 Name: PHYLLIS SCALZO 82 Street Address (P.O. Box Number Is Not Acceptable): 1914-C PALMLAND DRIVE 83 84 City: BOYNTON BEACH FL 85 Zip Code: 33436

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: x Phyllis Scalzo — 9/30/97
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) — DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PRESIDENT / Vice President	☐ DELETE	1.1 TITLE	PRESIDENT / SECRETARY	☒ Change ☐ Addition
NAME	PHYLLIS SCALZO		1.2 NAME	PHYLLIS SCALZO	
STREET ADDRESS	1914-C Palmland Drive		1.3 STREET ADDRESS	1914-C Palmland Drive	
CITY-ST-ZIP	Boynton Beach, Florida 33436		1.4 CITY-ST-ZIP	Boynton Beach Florida 33436	
TITLE	SEC / TREASURE	☒ DELETE	2.1 TITLE	VICE PRESIDENT / TREASURE	☐ Change ☒ Addition
NAME	JOAN GAUDETTE		2.2 NAME	SANATORE SCALZO	
STREET ADDRESS	2666 Cranbrook Dr.		2.3 STREET ADDRESS	1914-C Palmland Drive	
CITY-ST-ZIP	Boynton Beach, Florida 33436		2.4 CITY-ST-ZIP	Boynton Beach, Florida 33436	
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME	500002315305---4	
STREET ADDRESS			3.3 STREET ADDRESS	-10/08/97--01094--013	
CITY-ST-ZIP			3.4 CITY-ST-ZIP	*****61.25 *****61.25	
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

TLH 10/6/97

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 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.

SIGNATURE: x Phyllis Scalzo — 9/30/97 — 561-736-1479
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #