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SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750). **PROFIT** FLORIDA DEPARTMENT OF STATE

CORPORATION **ANNUAL REPORT** 1999

**Kutherine Harris** 

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000041633

PIZZA LOVER'S OF MIAMI, INC.

Principal Place of Business

Mailino Address

FILED 99 OCT 20 AM 9: 51

SECRETARY OF STATE TALLAHASSEE. FLORIDA



38 N.E. 102 STR MIAMI SHORES		38 N.E. 102 STREET MIAMI SHORES FL 3313	<b>96</b>		DO NOT WRITE IN TH	RIS SPACE
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21	Notes of Bookhood	26			NOT APPLICABLE	Not Applicable
Suite, Apt	#. etc.	Suite, Apt. #, etc.		·- · · · ·	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	е	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Zip 29	Counti	у	This corporation owes the current year     Intangible Personal Property.	Yes No
	9. Name and Address of Curr	ent Registered Agent		al 10	10. Name and Address of New Register	ed Agent
1 ICH	TFOOT, ROCHELLE M		8	1 Name		
415 N.W. 88TH TERRACE MIAMI FL 33150			Ľ	82 Street Address (P.O. Box Number is Not Acceptable)		
MIN-//AI			8	3		
			8	6 City		85 Zip Code
SIGNATURE .	Signature, typed or printed name of registered a	gent and title if applicable	(NOTE: Registered	Agent signature re	equired when reinstating) DATI ADDITIONS/CHANGES TO OFFICERS	
TITLE	PTS		13. 1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS	<del></del>
NAME	DARRING, STEPHANIE D ROI	L] DELETE	1.2 NAME	1		Change Addition
STREET ADDRESS	38 N.E. 102 STREET	J		ET ADDRESS	60000302:	<del>9</del> 9469
CITY-ST-ZIP	MIAMI SHORES FL 33138		1.4 CITY-		-11/01/99~	-01010005
TITLE	VP .	DELETE	2.1 TITLE		****150.0(	Change Addition
NAME	Darring, Stephanie		2.2 NAME	:		
STREET ADDRESS	38 N.E. 102 STREET		2.3 STREI	ET ADDRESS		
CITY-ST-ZIP	MIAMI SHORES FL 33138		2.4 CITY-			<u> </u>
NAME		☐ DELETE	3.1 TITLE 3.2 NAME	1		Change Addition
STREET ADORESS			1	ET ADDRESS		
CITY-ST-2IP			3.4 CITY-	1		
TITLE		DELETE	4.1 TITLE			Change Addition
NAME			4.2 NAME	: (		
STREET ADDRESS			4.3 STRE	ET ADORESS		
CITY-ST-ZIP			4.4 CITY-			
TITLE		DELETE	5.1 TITLE	1		Change Addition
NAME STOREST ADDRESS			5.2 NAME			ļ
STREET ADDRESS				ET ADORESS		
CITY-ST-ZIP		DELETE	5.4 CiTY- 6.1 TITLE			Change Addition
NAME		[_] DELETE	6.2 NAME			L Change L Addition
STREE! ADDRESS				ET ADDRESS		
CITY ST 710			\$4 CITY			KE

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 securate 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 807, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

CRZE034 (5/99)

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## 10/14/99

I am send the completed annual reports as instructed by your office, with the explanation of late filing due our mail was delivered to a neighbors house and give to us just this week.

I also have sent the required fee's of \$150.00 each for both corporations.

Thank You A & S Darring Ent. Inc II Pizza Lover's Of Miami