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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P97000105836 1. Corporation Name

## **FILED** Mar 17, 1999 8:00 am Secretary of State

03-17-1999 90149 028 \*\*\*150.00

112101	IZZA, INC:			
				ימסו וגום האוגן מסוטו וסוס הקונס הקונס גוסים ומנסג וונסג וונסט ווסגן וויקו סגו וקקונסו ו
Principal Place		Mailing Address		
115 YACHT CLU		115 YACHT CLUB LANE TIERRA VERDE EL 33715		
TIERRA VERDE FL 33715 TIERRA VERDE FL 33715				DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualifed
		_		12/16/1997
2. Principal P	lace of Business	2a. Mailing Address		4, FEI Number Applied For
21		26		APPLIED FOR 65-082-1200   Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired   \$8.75 Additional
22		27		- Fee Required
City & Stat	e	City & State		6. Election Campaign Financing \$5.00 May Be
23		28		Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year Intangible
24	25	29 3	30	Personal Property Tax.
	9. Name and Address of Curre	ent Registered Agent		10. Name and Address of New Registered Agent
700	L CAM I D		81 Name	
	LI, SAM J R		82 Street A	ddress (P.O. Box Number is Not Acceptable)
8413 JACARANDA AVE				
LARC	GO FL 33777-3619		83	
			84 City	<b>■■</b> 85 Zip Code
			84 City	FL 183 Zip Good
SIGNATURE	Signature, typed or printed name of registered an OFFICERS A	gent and title if applicable (NOTE E	Registered Agent signature re-	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	☐ DELETE	11 TITLE	U.P. Change HAddition
NAME	FAZIO, JOSEPH		1.2 NAME	SAM ZXX+ JR.
STREET ADDRESS	115 YACHT CLUB LANE		3 STREET ADDRESS	
CITY-ST-ZIP	TIERRA VEDRE FL 33715			BAIS TACARRANDA AME.
TITLE	ST ST		1.4.CITV.ST.7IP	6413 JACARZANDA AME.
NAME		☐ DELETE	1.4 CITY-ST-ZIP 2.1 TITLE	BAIB TACATZANDA AVE. LAZGO, FL 33777-3619  Change   Addition
STREET ADDRESS	FA/K} RENEE	☐ DELETE	2 ; TITLE	
	FAZIO, RENEE 115 YACHT CLUB LANE	☐ DELETE	2 i TITLE 22 NAME	
	115 YACHT CLUB LANE	☐ DELETE	2: TITLE 2: NAME 2:3 STREET ADDRESS	
CITY-ST-ZIP	_ · · · — - • · · · • · · · · · · · · · · · · · ·		2 i TITLE 22 NAME	
CITY-ST-ZIP	115 YACHT CLUB LANE		2 1 TITLE 22 NAME 23 STREET ADDRESS 2 4 CITY ST-ZIP	☐ Change ☐ Addition
CITY-ST-ZIP TITLE NAME	115 YACHT CLUB LANE		2 : TITLE 22 NAME 23 STREET ADDRESS 2 4 CITY - ST-ZIP 3 : TITLE	☐ Change ☐ Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS	115 YACHT CLUB LANE		2 1 TITLE 22 NAME 23 STREET ADDRESS 2 4 CITY ST-ZIP 3 1 TITLE 32 NAME	☐ Change ☐ Addition
CITY-ST-ZIP TITLE NAME	115 YACHT CLUB LANE		2 1 TITLE 22 NAME 23 STREET ADDRESS 2 4 CITY- ST-ZIP 3 1 TITLE 32 NAME 33 STREET ADDRESS	☐ Change ☐ Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	115 YACHT CLUB LANE	(_) DELETE	2 + TITLE 22 NAME 23 STREET ADDRESS 2 + CITY - ST - ZIP 3 + TITLE 32 NAME 33 STREET ADDRESS 34 CITY - ST - ZIP	☐ Change ☐ Addition☐ Change ☐ Change ☐ Addition☐ Change ☐ Ch
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	115 YACHT CLUB LANE	(_) DELETE	2 i Title 22 NAME 23 STREET ADDRESS 2 4 CITY: 51-ZIP 3 * TITLE 32 NAME 33 STREET ADDRESS 34 CITY: 51-ZIP 41 TITLE	☐ Change ☐ Addition☐ Change ☐ Change ☐ Addition☐ Change ☐ Ch
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CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	115 YACHT CLUB LANE	[] DELETE	2 1 TITLE 2 2 NAME 2 3 STREET ADDRESS 2 4 CITY 51-ZIP 3 1 TITLE 3 2 NAME 3 3 STREET ADDRESS 3 4 CITY 57-ZIP 4 1 TITLE 4 2 NAME 4 3 STREET ADDRESS 4 CITY 51-ZIP 5 1 TITLE 5 2 NAME	Change Addition
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14. Thereby certify that the information supplied with this filling 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 of on an attachment with an address, with all other like empowered.

SIGNATURE:

SAM ZCOLI, JTZ.