

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000014434

Entity Name: NAPLES PIZZA, INC.

**FILED**  
**Feb 26, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

10265 NO TAMIAMI TRAIL STE 3  
NAPLES, FL 34108

**New Principal Place of Business:**

**Current Mailing Address:**

10265 NO TAMIAMI TRAIL STE 3  
NAPLES, FL 34108

**New Mailing Address:**

FEI Number: 59-3491027

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

COMERIATO, ANTHONY J  
10265 NO TAMIAMI TRAIL STE 3  
NAPLES, FL 34108 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: MOORE, ROBERT J  
Address: 10265 N TAMIAMI TRAIL #3  
City-St-Zip: NAPLES, FL 34108

Title: VD  
Name: COMERIATO, ANTHONY J  
Address: 41 MENTOR DR  
City-St-Zip: NAPLES, FL 34110

Title: S  
Name: MOORE, DEBRA  
Address: 10265 N. TAMIAMI TRAIL #3  
City-St-Zip: NAPLES, FL 34108

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: ANTHONY COMERIATO

VD

02/26/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date