ام ``	PROFIT	FLORIDA DEPAR	TMENT OF STATE		
	RPORATION AND REPORT	Katherin	=		
	ANNUAL REPORT Secretary of State  1999 DIVISION OF CORPORATIONS			FILED	
			99 NOV 22 PM 12: 11		
1. Cognitate	MENT # <b>P98000</b>	018555			
NEW Y	ORK PIZZA CLUB, INC.			TALLAHA	NT OF STATE SEE FLORIDA
				I TARANGEN IND HOLDEN COM TARANGEN TO THE	
Proojpal Piac	e of Business	Mailing Address			
529 S BOYD STREET		529 S. BOYD STREET			
WINTER GARDEN FL 34787 WINTER GARDEN FL			•	DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
2 Proposal D	Place of Business	2a. Mailing Address		02/25/1998 4. FEI Number	Applied For
	Govk Pizzo Club	26 New York V Suite, Apt. #, etc.	Pizza Club	59-3503085	Not Applicable
Suite Apt 22] → Э^э	53 N. Higwayan Rol.	Suite. Apt. #, etc. 27 353 No- HK	awasse Rol.	5. Certificate of Status Desired	\$8.75 Additional Fee Required
Oity & Stat	m Knoh AL	City & State  28 Unionition FC	39818	Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country Zip			Country	8. This corporation owes the current	. [ [ ]
24, 373	9. Name and Address of Current	and the contract of the contra	30	Intangible Personal Property  10. Name and Address of New Rec	
ΙΔF	ROV WILLIAM		81 Name		
laboy, William 5829 S. Boyd Street			82 Street Address (P.O. Box Number is Not Acceptable)		
WI	NTER GARDEN FL 34787		83		
			84 City		FL 85 Zip Code
44	the the provisions of sections 607 0502	1.007.4500 Etc. of .01.4.45	the chair served core	·	ose of changing its registered
TU Parsann	required agent or both in the State	of Florida, Such change was at	thorized by the cornors	oration submits this statement for the purp-	ne appointment as registered
ofne or agent V	registered agent, or both, in the State and familiar with, and accept the obliga	of Florida Such change was au	athorized by the corpora	oration submits this statement for the purp fion's board of directors. I hereby accept t	ne appointment as registered
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53 STREET ADDRESS 5 4 CITY-ST-ZIP

6.3 STREET ADDRESS

6 1 TITLE

6 2 NAME

64 CITY-ST-ZIP

14. Thereby on the the information supplied with this filing does not dualify for the exemption stated in section 119.07(3)(i). Florida Statutes. I further certify that the information indicated or 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 of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in 8 m is 12 or Block 13 if challeged for on an intachment with an address. SIGNATURE:

Shedita . . . . .

111:1

1,2150

DELETE

Daytime Phone #

Date

Change Addition