

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000055556

Entity Name: SEMINOLE PIZZARIA, INC.

FILED
Apr 22, 2007
Secretary of State

Current Principal Place of Business:

6753 THOMASVILLE RD.
UNIT 107
TALLAHASSEE, FL 32312

New Principal Place of Business:

Current Mailing Address:

P.O. 835
READING, MA 01867

New Mailing Address:

FEI Number: 59-3520619

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VISCONTI, JAMES
902 OAK KNOLL AVE
TALLAHASSEE, FL 32308 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: VISCONTI, WILLIAM J
Address: P.O. BOX 835
City-St-Zip: READING, NA 01817

Title: COO () Delete
Name: VISCONTI, JAMES
Address: 902 OAK KNOLL RD
City-St-Zip: TALLAHASSEE, FL 32312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: WJVISCONTI

P

04/22/2007

Electronic Signature of Signing Officer or Director

Date