## **FILED** Mar 09, 1999 8:00 am Secretary of State

03-09-1999 90144 006 \*\*\*150.00

## **PROFIT** CORPORATION ANNUAL REPORT



Katherine Harris Secretary of State

FLORIDA DEPARTMENT OF STATE

'	1999	DIVISION OF C	1	_	-				
DOCUMENT # P9800088632  1. Corporation Name MASSIMO PIZZA, INC.									
MICCANI	U FIZZA, ING.					) LEARNAGE RED JENOU RANN DEURL BERNE ARINN ALLER ALLER FR	AL MARK AMPA	ene ancer	
Principal Place of Business Mailing Address									
3951 N. HAVERHILL RD., UNIT 126 3951 N. HAVERHILL RD., UNIT W. PALM BCH FL 33417 W. PALM BCH FL 33417									
						DO NOT WRITE IN THIS S	PACE		i
						3. Date Incorporated or Qualified 10/16/1998			
2, Principal P	lace of Business	2a. Mailing Address				4. FEI Number		olied For	
21		26				65-0869737		Applicable	ı
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired   \$8.75 Additional Fee Required			
City & Stat	9	City & State				8. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
23	Country	Zip Country				8. This corporation owes the current year Intengible			
Zip	Country		30			Parsonal Property Tax. Yes No			- =
24	9. Name and Address of Current Registered Agent			$\overline{}$		10. Name and Address of New Registered A	gent		l
<del></del>		<del></del>		81	Name				ĺ
	Tuzzelli, gianni e. Hampton way			82	Street Addre	ess (P.O. Box Number Is Not Acceptable)	de la diale.	<del></del>	l
		02 Sheet Add			等。這個機能對於於 <b>經濟</b> 的人	144 1	t; ¢ ; , , , ,		
JUPI	TER FL 33458			83		The state of the s	31	/f3, 1., ; <u>t</u>	l
ļ			ļ	84	City		85 Zip C	ebo	ì
						FL	andra lte	maistered	ĺ
						oration submits this statement for the purpose of or n's board of directors. I hereby accept the appoint	neut as tet	istered	l
agent. i a	m familiar with, and accept the obligati	ions of, Section 607.0505, Flori	da Statu	ıles.					ĺ
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE:	Regulared	Agent	signature required	when reinstating) DATE			1 6
12.	OFFICERS AND	<del></del>	13.	<u></u>		ADDITIONS/CHANGES TO OFFICERS AND			ĝ
πιε	PT	☐ DELETE	1.1 TITLE		_		☐ Change	Addition	CR2E034 (11/98)
NAME	BERTUZZELLI, GIANNI '		12 NAME						8
STREET ADDRESS	126 E. HAMPTON WAY				ADDRESS				ZE
CITY-ST-ZIP	JUPITER FL 33458	☐ DELETE	1.4 CITY-1		-ZIP		Change	Addition	5
TILE	VS PRANCATO PERMARRIMO	C) Defrie	DELETE 2.1 TITU 2.2 NAM				ت. دارت	٠	
NAME	BRANCATO, BERNARDINO 180 E. HAMPTON WAY			-	ADORESS		<b>.</b>	. {	į
STREET ADDRESS	JUPITER FL 33458			TY-ST	· 1				
CITY-ST-ZIP	00/1121112 00400	☐ DELETE	3.1 TIT				Change	Addition	
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CITY-ST-ZIP	<u> </u>		3.4. CI	TY-ST	-210				l
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NAME			4.2N		ļ	•		İ	ĺ
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CITY-ST-ZIP		☐ DELETE	4.4 CT 5.1 TTT	TY-5T-	-ZIP		☐ Change	Addition	
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NAME STREET ADDRESS					ADDRESS		•	ļ	i
CITY-ST-ZIP			5.4 CIT		The state of the s				
TITLE		☐ DELETE	6.1 717	LE .			Change	Addition	
NAME			8.2 NA	WE	1			{	l
				REET	ADDRESS			ļ	
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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 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 on an attachment with an address, with all other like empowered.

CHICER OR DIRECTOR

SIGNATURE:

561-683-0331