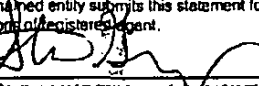
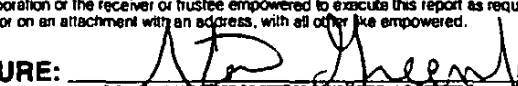


APPROVAL
07-07-2005 90079 031 ***150.00
FILE
P99000054211

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. Eckel JUL 26 2005

DOCUMENT # P99000054211				05 JUL 26 PM 2:38	
1. Entity Name THE PIZZA FACTORY, INC.		SECRETARY OF STATE TALLAHASSEE, FLORIDA			
Principal Place of Business 9180 GLADES ROAD BOCA RATON, FL 33434		Mailing Address 9180 GLADES ROAD BOCA RATON, FL 33434			
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		07032005 Chg-P CR2E034 (10/03)	
City & State		City & State		4. FEI Number 65-0940950	
Zip		Country		Applied For Not Applicable	
5. Certificate of Status Desired		8.75 Additional Fee Required			
8. Name and Address of Current Registered Agent FOGEL, MITCHELL C 2499 GLADES RD, SUITE 105 BOCA RATON, FL 33431				7. Name and Address of New Registered Agent Name: Steve Greenberg Street Address (P.O. Box Number is Not Acceptable): 9180 Glades Road City: Boca Raton FL Zip Code: 33434	
B. 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. I am familiar with, and accept the obligations of, the registered agent.					
SIGNATURE:  Steve Greenberg DATE: 6/30/05					
FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005					
B. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE: D NAME: GREENBERG, STEVEN STREET ADDRESS: 3975 COCOPLUM CIRCLE CITY-ST-ZIP: COCONUT CREEK, FL 33063			TITLE: NAME: Greenberg Steven STREET ADDRESS: 21745 LITTLE BEAR WAY CITY-ST-ZIP: BOCA RATON FL 33428		
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:			TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:		
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:			TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:		
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TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:			TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:		
12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:  DATE: 6/30/05 561483-5865					