2008 FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT # P99000060484 1. Entity Name R.C. PIZZA, INC. Mailing Address 1922 E OSCEOLA PKWY KISSIMMER FL 34743 SAINT CLOUD FL 34771

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Principal Place of Business 1922 E OSCEOLA PKWY KISSIMMEE, FL 34743		Mailing Address 6507 COTTAGE LN SAINT CLOUD, FL 34771					
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	O NOT WRITE I	N THIS SPA	CE	4. FEI Number 59-3587		\$8.	Applied For Not Applicable 75 Additional
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6. Name and Address of Current Registered Agent TRAENKNER, RICK 6507 COTTAGE LN SAINT CLOUD, FL 34771					VOT W HIS SP		
8. 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 registered agent. SIGNATURE Signature, typed or profiled name of registered agent and talls if applicable (NOTE Registered Agent signature required when reinstating) (NOTE Registered Agent signature required when reinstating)							
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Fin Trust Fund Contribution			* _ ++.	00 May Be ed to Fees	02/12/0	3-80011-(011 150.00
10.	OFFICERS AND DIRE	CTORS	A STATE OF STATE	Wille Organia	The Party of the Party	43/15 (USE)" (A	स्थानः । १८८ वर्षः ।
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes | 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-29-08

Daytime Phone #