

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 21, 2005 8:00 am**  
**Secretary of State**

02-21-2005 90067 010 \*\*\*150.00

**DOCUMENT # P99000076731**

1. Entity Name  
**PEPPERS OF PINELLAS PARK, INC.**



Principal Place of Business  
**8091 66TH STREET NORTH  
PINELLAS PARK, FL 34565**

Mailing Address  
**8091 66TH STREET NORTH  
PINELLAS PARK, FL 34565**

**20013541**



02082005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**59-3594257**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**PAHOUMIS, CHRIS  
881 BELTED KINGFISHER DRIVE  
PALM HARBOR, FL 34683**

**DO NOT WRITE  
IN THIS SPACE**

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 *Chris P. Poulos*

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

2-16-05 DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE PD  
NAME PAHOUMIS, CHRIS  
STREET ADDRESS 881 BELTED KINGFISHER DRIVE  
CITY-ST-ZIP PALM HARBOR, FL 34683

TITLE VD  
NAME GRAFOS, SOULA  
STREET ADDRESS 1743 GROVE VALLEY DRIVE  
CITY-ST-ZIP PALM HARBOR, FL 34683

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

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: *Chris P. Poulos*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CHRIS PAHOUMIS

Date

2-16-05

Daytime Phone #