

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S50934 (6)

1. Corporation Name

PIZZA U.S.A. OF PEMBROKE, INC.



Principal Place of Business

Mailing Address

PEMBROKE LAKES MALL
11401 PINES BLVD. BAY 504
PEMBROKE PINES FL 33026
US

2201 WEST SAMPLE ROAD
BUILDING 9 SUITE 1B
POMPANO BEACH FL 33073
US

3. Date Incorporated or Qualified
05/09/1991

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

21 26 1761 W. Hillsboro Blvd.

4. FEI Number
65-0267451

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

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

22 City & State

27 Suite 401

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

23 City & State

28 Deerfield Beach, FL

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

24 Zip

Country

29 33442

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WHALEN, NANCY
2201 W SAMPLE RD.
BLDG 9, #1B
POMPANO BEACH FL 33073

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)
1761 W. Hillsboro Blvd. #401

83

84 City

Deerfield Beach

FL

85 Zip Code

33442

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent Signature Required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE
NAME CASTELLANO, M MARK
STREET ADDRESS 2201 W. SAMPLE RD BLDG 9 #1A
CITY-ST-ZIP POMPANO BCH FL

TITLE D ☐ DELETE
NAME CASTELLANO, JOHN
STREET ADDRESS 2201 W. SAMPLE RD BLDG. 9 #1A
CITY-ST-ZIP POMPANO BCH FL

TITLE P ☐ DELETE
NAME NEVIN, RAYMOND
STREET ADDRESS 2201 W. SAMPLE RD BLDG 9 #1B
CITY-ST-ZIP POMPANO BEACH FL

TITLE S ☐ DELETE
NAME WHALEN, NANCY
STREET ADDRESS 2201 W SAMPLE BLDG 9, #1B
CITY-ST-ZIP POMPANO BEACH FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS 1761 W. Hillsboro Blvd. #401
1.4 CITY-ST-ZIP Deerfield Beach, FL 33442

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS 1761 W. Hillsboro Blvd. #401
2.4 CITY-ST-ZIP Deerfield Beach, FL 33442

3.1 TITLE ☒ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS 1761 W. Hillsboro Blvd. #401
3.4 CITY-ST-ZIP Deerfield Beach, FL 33442

4.1 TITLE ☒ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS 1761 W. Hillsboro Blvd. #401
4.4 CITY-ST-ZIP Deerfield Beach, FL 33442

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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, changed, or on an attachment with an address.

SIGNATURE:

Nancy L. Whalen
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Nancy L. Whalen

4/19/96
Date

954-428-5660
Daytime Phone #

CR2E034 (12/95)