## **2001 UNIFORM BUSINESS REPORT (UBR)**

SIGNATURE:

## FILED Apr 12, 2001 8:00 am Secretary of State **DOCUMENT # \$50934** 1. Entity Name PIZZA U.S.A. OF PEMBROKE, INC. 04-12-2001 90186 034 \*\*\*150.00 Principal Place of Business Mailing Address PEMBROKE LAKES MALL 1761 W. HILLSBORO BLVD. 11401 PINES BLVD. BAY 504 **STE 401** 00035517 PEMBROKE PINES FL 33026 DEERFIELD BCH FL 33442 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number Applied For City & State 65-0267451 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ゴひみん CASTECLAN O NEVIN, RAYMOND 1761 W. HILLSBORO BLVD. 401 401 DEERFIELD BCH FL 33073 purpose of changing its registered office or registered agent, or both, in the State of Florida. 8. The above named entity SIGNATURE (NOTE: Registered Agent signature required when reinstating) agent and title if applicable. 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Added to Fees Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. CR2E034 (10/00) TITLE ☐ Delete ☐ Change CASTELLANO, M MARK NAME NAME STREET ADDRESS STREET ADDRESS 1761 W. HILLSBORO BLVD. 401 CITY-ST-ZIP CITY-ST-ZIP DEERFIELD BCH FL Pars. TITLE ☐ Delete TITLE ☐ Change CASTELLANO, JOHN NAME NAME STREET ADDRESS STREET ADDRESS 1761 W. HILLSBORO BLVD. 401 CITY-ST-ZIP CITY-ST-ZIP DEERFIELD BCH FL TITLE Change Addition **NEVIN, RAYMOND** NAME NAME STREET ADDRESS STREET ADDRESS 1761 W. HILLSBORO BLVD. 401 CITY-ST-ZIP CITY-ST-7IP DEERFIELD BCH FL ☐ Delete Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Delete Change TITLE TITLE ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change TITLE TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or directored to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if all other like entoywered. 13. I hereby certify that the information supplied indicated on this report or supplemental re of the corporation or the receiver or trustee changed, or on an attachment with ar