

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 02, 2007 8:00 am
Secretary of State

02-02-2007 90008 028 ***150.00

DOCUMENT # S57126

1. Entity Name

PIZZA RANT WEST, INC.



Principal Place of Business

4831 SW 148 AVE
DAVIE FL 33330

Mailing Address

4831 SW 148 AVE
DAVIE FL 33330



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE

CR2E034 (10/06)

City & State

City & State

4. FEI Number 65-0265112

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SILVESTRO, ANTONIO
11331 NW 5 STREET
PLANTATION FL 33325

Name DONATO DILEO

Street Address (P.O. Box Number is Not Acceptable)

4763 Hibbs GROVE TERRACE

City COOPER City

FL

Zip Code 33330

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

Antonio Silvestro

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

(NOTE: Registered Agent signature required when re-registering)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

TITLE D ☒ Delete
NAME SILVESTRO, ANTONIO
STREET ADDRESS 11331 NW 5TH ST.
CITY-STATE-ZIP PLANTATION FL

TITLE D ☒ Delete
NAME SILVESTRO, JOSEPHINE
STREET ADDRESS 11331 NW 5TH ST.
CITY-STATE-ZIP PLANTATION FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DONATO DILEO ☒ Change ☐ Addition
NAME
STREET ADDRESS 4763 Hibbs GROVE TERRACE
CITY-STATE-ZIP COOPER City FL 33330 PRES.

TITLE Antonio Silvestro SR. ☒ Change ☐ Addition
NAME
STREET ADDRESS 11331 NW 5TH STREET
CITY-STATE-ZIP Plantation, FL 33325 SEC.

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:

Antonio Silvestro

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #