

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

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Apr 01 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # V27025 (8) 1. Corporation Name THE ULTIMATE PIZZA OF VERO BEACH, INC.			
Principal Place of Business 620 SW OLD DIXIE HIGHWAY VERO BEACH FL 32960		Mailing Address 620 SW OLD DIXIE HIGHWAY VERO BEACH FL 32962-4536	
2. Principal Place of Business 21 1265 OLD DIXIE Hwy State, Apt. #, etc. 22 VERO BEACH, FL City & State 23 32960 INDIAN RIVER Zip Country		2a. Mailing Address 26 1265 OLD DIXIE Hwy State, Apt. #, etc. 27 VERO BEACH, FL City & State 28 32960 INDIAN RIVER Zip Country	
9. Name and Address of Current Registered Agent ROSSWAY, BRADLEY W. 756 BEACHLAND BLVD. VERO BEACH FL 32963		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____			
12. OFFICERS AND DIRECTORS 1.1 TITLE <input type="checkbox"/> DELETE 1.2 NAME P FOTHERGILL, LORI 1.3 STREET ADDRESS 620 SW OLD DIXIE HWY 1.4 CITY-ST-ZIP VERO BEACH FL 1.5 TITLE <input type="checkbox"/> DELETE 1.6 NAME 1.7 STREET ADDRESS 1.8 CITY-ST-ZIP 1.9 TITLE <input type="checkbox"/> DELETE 1.10 NAME 1.11 STREET ADDRESS 1.12 CITY-ST-ZIP 1.13 TITLE <input type="checkbox"/> DELETE 1.14 NAME 1.15 STREET ADDRESS 1.16 CITY-ST-ZIP 1.17 TITLE <input type="checkbox"/> DELETE 1.18 NAME 1.19 STREET ADDRESS 1.20 CITY-ST-ZIP			
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1.2 NAME 1.3 STREET ADDRESS 1265 OLD DIXIE HIGHWAY 1.4 CITY-ST-ZIP VERO BEACH, FL 2.1 TITLE → POTHERGILL, LORI <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 2.2 NAME 2.3 STREET ADDRESS 1265 OLD DIXIE HIGHWAY 2.4 CITY-ST-ZIP VERO BEACH, FL 3.1 TITLE <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 3.2 NAME Joseph, LISA 3.3 STREET ADDRESS 1265 OLD DIXIE HIGHWAY 3.4 CITY-ST-ZIP VERO BEACH, FL 4.1 TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 4.2 NAME Joseph, LISA 4.3 STREET ADDRESS 1265 OLD DIXIE HIGHWAY 4.4 CITY-ST-ZIP VERO BEACH, FL 5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> 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 does not qualify for the exemption stated in Section 119.07(3)(i), 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, if changed, or on an attachment with an address.			
SIGNATURE: Lori Fothergill 3/6/97 (561) 567-1414 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone			



CR2E034 (9/96)