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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

SIGNATURE:

DOCUMENT #

1. Corporation Name

(0)

PAPA JOE'S OF DEBARY, INC.

	IOE'S OF DEBAKY, INC.				
rincipal Place o	f Business	Mailing Address			
2975 ENTERS DEBARY FL		2975 ENTERPRISE DEBARY FL 3271			
				 Date Incorporated or Qualifiting 10/09/1992 	05/01/1995
2. Principal Plac	e of Business	2a. Mailing Address		4. FEI Number	Applied For
]		26		59-3146480	Not Applicable
Suite, Apt. #,	etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	Fee Required
City & State		City & State		Election Campaign Financial Trust Fund Contribution	Added to Fees
Ζιρ	Country	Zip	Country		y for intangible tax under s 199.032, Yes ☐ No
<u> </u>	25	29	30	Florida Statutes U 10. Name and Address of No	
	9. Name and Address of Curre	ent Hegistered Agent	81 Name	10, Name and Marie	
<u></u>	D. DIGILIDO 7		[-1]	(D.O. Prov. Number in Not Aper	antable)
	DI, RICHARD T.		82 Street A	Address (P.O. Box Number is Not Acce	эµ.ao.e)
	MBLEDON CIRCLE		83	2 54004 1544	C10
HEATH	ROW FL 32746		(4)	2 SHADWELL	
			84 City H	FATHROW rporation submits this statement for th	FL 32746
11 Pursuant to	the provisions of Sections 607.050	02 and 607.1508, Florida St	atutes, the above-named co	rporation submits this statement for th	e purpose of changing its registered off appointment as registered agent. I am
or registere	d agent, or both, in the State of Flo	irida. Such change was auth a⊌on 607 0505. Florida Stat	norized by the corporation's tutes.	board of directors. I hereby accept the	e purpose of changing its registered oil appointment as registered agent. I am
tamıllar witi	Mesunol Chewile	our biuse	DOS HAMAPON	e Vice I Res	4/24/96
	Signature, two-printed purie of registered age	ent and title if applicable	(NOTE: Registered Agent signature in	oquired when reinstating)	DATE DIPLOTORS IN 12
	signature, two-printed partie of registered age	ent and title if applicable ND DIRECTORS	(NOTE: Registered Agent signature in 13.	quired when reinstating) ADDITIONS/CHANGES TO	OFFICERS AND DIRECTORS IN 12
12.	OFFICERS A	ent and title if applicable	NOTE: Registered Agent signature in 13. 1.1 TIFLE	ADDITIONS/CHANGES TO	RA Change 🗀 Addition
12.	OFFICERS A PD GRIMALDI, RICHARD	ent and title if applicable: ND DIRECTORS DELETE	NOTE: Registered Agent signature in 13. 1.1 TIFLE 1.2 NAME	ADDITIONS/CHANGES TO	RA Change 🗀 Addition
12. TITLE	PD GRIMALDI, RICHARD 260 WIMBLEDON CIRCLE	ent and title if applicable: ND DIRECTORS DELETE	NOTE: Registered Agent signature in 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	ADDITIONS/CHANGES TO F GRIMALDI, RICHE 1412 SHADWELL (RED Change Addition
12. TITLE NAME STREET ADDRESS	PD GRIMALDI, RICHARD 260 WIMBLEDON CIRCLE HEATHEROW FL	ent and title if applicative ND DIRECTORS DELETE	NOTE: Registered Agent signature in 13. 1.1 TIFLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	ADDITIONS/CHANGES TO P GRIMALDI, RICHE 1412 SHADWELL (HEATHROW, FI	ARA Change Addition OIR. L. 32746 RI Change Addition
12. TITLE NAME STHEET ADDRESS CHY-ST-ZIP	PD GRIMALDI, RICHARD 260 WIMBLEDON CIRCLE HEATHEROW FL	ent and title if applicable: ND DIRECTORS DELETE	NOTE: Registered Agent signature in 13.	ADDITIONS/CHANGES TO P GRIMALDI, RICHE 1412 SHADWELL (HEATHROW, FI	ARD Change Addition Classification Change Addition Change Addition USEPPE
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