

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000090683

**Entity Name:** QUEEN'S PIZZA & RESTAURANT OF TARPON, INC.

**Current Principal Place of Business:**

40949 U.S. HIGHWAY 19 NORTH  
TARPON SPRINGS, FL 34689

**Current Mailing Address:**

40949 U.S. HIGHWAY 19 NORTH  
TARPON SPRINGS, FL 34689

**FEI Number: 59-3672579**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

LOUKATARIS, JOHN D  
40949 US 19 HWY NORTH  
TARPON SPRINGS, FL 34689 US

*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.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DVPS  
Name ATHANASATOS, ANTHONY  
Address 451 SILVER MOSS LANE  
City-State-Zip: TARPON SPRINGS FL 34688

Title DPT  
Name LOUKATARIS, JOHN D  
Address 4688 BRATYON TERRACE S  
City-State-Zip: PALM HARBOR FL 34685

Title DVP  
Name LOUKATARIS, PETER  
Address 520 CYPRESS BEND  
City-State-Zip: OLDSMAR FL 34677

Title DVP  
Name DIMITRIOS LOUKATARIS  
Address 363 SILVER MOSS LN  
City-State-Zip: TARPON SPRINGS FL 34688

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE: JOHN LOUKATARIS**

**DPT**

**03/31/2018**

Electronic Signature of Signing Officer/Director Detail

Date