

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000016082

**FILED**  
**Mar 04, 2014**  
**Secretary of State**  
**CC8645165215**

**Entity Name:** SACHEL'S PIZZA INCORPORATED

**Current Principal Place of Business:**

1800 NE 23RD AVE  
GAINESVILLE, FL 32609

**Current Mailing Address:**

1800 NE 23RD AVE  
GAINESVILLE, FL 32609 US

**FEI Number:** 75-3098508

**Certificate of Status Desired:** No

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

RAYE, STEPHEN K  
2801 SE 27TH AVE  
GAINESVILLE, FL 32641 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 P  
Name RAYE, STEPHEN K  
Address 2801 SE 27TH AVE  
City-State-Zip: GAINESVILLE FL 32641

Title V  
Name RAYE, CAROLINE E  
Address 2801 SE 27TH AVE  
City-State-Zip: GAINESVILLE FL 32641

Title S  
Name RAYE, CAROLINE E  
Address 2801 SE 27TH AVE  
City-State-Zip: GAINESVILLE FL 32641

Title T  
Name RAYE, STEPHEN K  
Address 2801 SE 27TH AVE  
City-State-Zip: GAINESVILLE FL 32641

*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:** STEPHEN RAYE

**PRESIDENT**

**03/04/2014**

Electronic Signature of Signing Officer/Director Detail

Date