

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P21000005476

**Entity Name:** MICHAEL ANTHONYS PIZZERIA OF FLORIDA INC

**Current Principal Place of Business:**

985 HENSTRACH ROAD  
LAKE PLACID, FL 33852

**Current Mailing Address:**

PO BOX 1480  
LAKE PLACID, FL 33862

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

CASTRONOVO, ANTHONY  
985 HENSCRATCH ROAD  
LAKE PLACID, FL 33852 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 CASTRONOVO, ANTHONY  
Address PO BOX 1480  
City-State-Zip: LAKE PLACID FL 33862

Title VP  
Name CASTRONOVO, PAMELA  
Address PO BOX 1480  
City-State-Zip: LAKE PLACID FL 33862

*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:** ANTHONY CASTRONOVO

**PRESIDENT**

**04/30/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date