

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J69201

FILED
Apr 26, 2006
Secretary of State

Entity Name: TAKI'S PIZZA NO. 1 OF LEESBURG, INC.

Current Principal Place of Business:

% GARIFALIA TSOLAKIS
1324 NORTH BLVD
LEESBURG, FL 34748

New Principal Place of Business:

Current Mailing Address:

% GARIFALIA TSOLAKIS
1324 NORTH BLVD
LEESBURG, FL 34748

New Mailing Address:

FEI Number: 59-2938434 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TSOLAKIS, STEVE
1324 NORTH BLVD.
LEESBURG, FL 32748 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: TSOLAKIS, GARIFALIA,
Address: 1324 NORTH BLVD.
City-St-Zip: LEESBURG, FL

Title: P () Delete
Name: TSOLAKIS, DEMETRIOS,
Address: 1324 NORTH BLVD.
City-St-Zip: LEESBURG, FL

Title: VP () Delete
Name: TSOLAKIS, STEVE
Address: 1324 NORTH BLVD
City-St-Zip: LEESBURG, FL

Title: S () Delete
Name: TSOLAKIS, KATHERINE
Address: 1324 N. BLVD
City-St-Zip: LEESBURG, FL 34748

Title: D () Delete
Name: TSOLAKIS, NICK
Address: 1324 N BLVD
City-St-Zip: LEESBURG, FL 34748

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: TSOLAKIS, KATERINA
Address: 1324 N. BLVD
City-St-Zip: LEESBURG, FL 34748

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: STEVE TSOLAKIS

VP

04/26/2006

Electronic Signature of Signing Officer or Director

_____ Date