

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000003218

FILED
Jan 24, 2006
Secretary of State

Entity Name: THE ERASMUS GROUP, L.L.C.

Current Principal Place of Business:

120 S.E. 3 AVENUE
SUITE B QUIZNOS
MIAMI, FL 33131

New Principal Place of Business:

120 S.E. 3 AVENUE
QUIZNOS SUB
MIAMI, FL 33131

Current Mailing Address:

PO BOX 310964
QUIZNOS
MIAMI, FL 332310964

New Mailing Address:

PO BOX 310964
QUIZNOS SUB
MIAMI, FL 33231

FEI Number: 65-0924194

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LORENZO, LORENZO
120 B SE 3 AVENUE
MIAMI, FL 33131 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: LORENZO, LORENZO
Address: 120 SE 3 AVENUE SUITE B
City-St-Zip: MIAMI, FL 33131

Title: MGRM () Delete
Name: JIMENEZ, JOSE
Address: 120 SE 3 AVENUE SUITE B
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: LORENZO, LORENZO
Address: 120 SE 3 AVENUE (QUIZNOS)
City-St-Zip: MIAMI, FL 33131

Title: MGRM (X) Change () Addition
Name: JIMENEZ, JOSE
Address: 120 SE 3 AVENUE (QUIZNOS)
City-St-Zip: MIAMI, FL 33131

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: LORENZO LORENZO

MGRM

01/24/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date