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SECOND BLIMPIE BROWARD LEASING, LLC						FILED					
Principal Place of Business Mailing Address						01 SEP 19 PH 12: 17					
Principal Place of Business C/O UNITED CORPORATE SERVICES. INC. 9200 SOUTH DADELAND BLVD SUITE 508 MIAMI FL 33156		177	1775 THE EXCHANGE. SUITE 600 ATLANTA GA 30339				SECRETARY OF STATE TALLAHASSEE, FLORIDA				
Principal Place of Business 3.		3. N	3. Mailing Address								
Suite, Apt. #, etc.		S	Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE				
City & State		c	City & State			4. FE	4. FEI Number 65-0599001 Applied For Not Apolicable				
Zip	Zip Country		Zip Cour		ntry	5 Cortificate of Status Desired S5.0		5.00 Add		1	
	6. Name and Address of Currer	it Registe	ered Agent		Τ	7. Na	me and Address of New Ro			<u>-</u>	┨
	o. Harrie and Address of Guiter	it riogist	ord Agent		Name						1
UNITED CORPORATE SERVICES, INC. 9200 SOUTH DADELAND BLVD., SUITE 508				Street Address (P.O. Box Number is Not Acceptable)							
MIAMI FL 33156											
				City FL Zip Code							
8. The above	named entity submits this statement	for the pu	urpose of changing its	register	ed office or	registered agen	it, or both, in the State of Flo	rida.	•		1
SIGNATURE		-1 4 84- 14	(NOTE	. Dogistor	nd Agent signatu	re required when rains	dating)	DATE			
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STREET ADDRESS CITY-ST-ZIP

6/18/01

11. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that mysignature 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:

SIGNATURE:

2001 UNIFORM BUSINESS REPORT (UBR)

NAME 3 · STREET ADDRESS

CITY-ST-ZIP

SIGNATURE