2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000057992

Entity Name: 3666 SUBWAY, INC.

Title:

Name:

Address: City-St-Zip:

FILED Apr 28, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 14530 SO MILITARY TRAIL DELRAY BEACH, FL 33484 US **New Mailing Address: Current Mailing Address:** 14530 SO MILITARY TRAIL DELRAY BEACH, FL 33484 US FEI Number: 02-0693176 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KARIM, MOHAMMED SOCOL, ANDREW 767 SOUTH STATE ROAD 7 20810 WEST DIXIE HWY SUITE 13 MIAMI, FL 33180 MARGATE, FL 33068 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: ANDREW SOCOL 04/28/2008 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition NAVIWALA, QADIR A Name: Name: 767 S. STATE RD 7 SUITE 13 Address: Address: City-St-Zip: MARGATE, FL 33068 City-St-Zip: Title: Title: () Delete () Change () Addition Name: KARIM MOHAMMED Name: 767 S. STATE RD 7 SUITE 13 Address: Address: MARGATE, FL 33068 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition MAJID, AFZAL Name: Name: 767 S. STATE RD 7 SUITE 13 Address: Address: City-St-Zip: MARGATE, FL 33068 City-St-Zip: Title: () Delete Title: () Change () Addition MOHAMMAD, SAQIB Name: Name: Address: 6091 LAMBETH CIRCLE Address: City-St-Zip: LAKE WORTH, FL 33463 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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.

Title:

Name:

Address:

City-St-Zip:

Ρ SIGNATURE: MOHAMMED KARIM 04/28/2008

() Delete

KALIA, MOHAMMAD

6091 LAMBETH CIRCLE

LAKE WORTH, FL 33463

() Change () Addition