

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000051219

Entity Name: SUBWAY 29921 INC

FILED  
Apr 20, 2009  
Secretary of State

**Current Principal Place of Business:**

20810 WEST DIXIE HIGHWAY  
NORTH MIAMI BEACH, FL 33180

**New Principal Place of Business:**

**Current Mailing Address:**

20810 WEST DIXIE HIGHWAY  
NORTH MIAMI BEACH, FL 33180

**New Mailing Address:**

FEI Number: 20-4667592      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

ARS & ASSOCIATES INC  
20810 WEST DIXIE HIGHWAY  
NORTH MIAMI BEACH, FL 33180      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: P ( ) Delete  
Name: MAJID, AFZAL  
Address: 20810 WEST DIXIE HIGHWAY  
City-St-Zip: NORTH MIAMI BEACH, FL 33180

Title: VP ( ) Delete  
Name: KARIM, MOHAMMED H  
Address: 20810 WEST DIXIE HIGHWAY  
City-St-Zip: NORTH MIAMI BEACH, FL 33180

Title: TREA ( ) Delete  
Name: NAVIWALA, QADIR A  
Address: 20810 WEST DIXIE HIGHWAY  
City-St-Zip: NORTH MIAMI BEACH, FL 33180

Title: VP ( ) Delete  
Name: KHUSHMANDER, KUJAR  
Address: 23811 WEST POINT H-2  
City-St-Zip: MIAMI, FL 33180

**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: ( ) Change ( ) Addition  
Name:  
Address:  
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.

SIGNATURE: AFZAL MAJID

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

P

04/20/2009

\_\_\_\_\_ Date