PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000034385

1. Corporation Name

SUBWAY 6942, INC.

May 04, 1999 8:00 am Secretary of State

05-04-1999 90064 016 ***150.00



l	·.					
Principal Place	e of Business	Mailing Address				98:80 (1)(1 8188) (1)(0) (0)(1) (1)(1 (0))
341 BEACHWO	OD DR.	341 BEACHWOOD DR.	341 BEACHWOOD DR.			•
KEY BISCAYNE FL 33149		KEY BISCAYNE FL 33149		DO NOT WIDITE IN	THE PRACE	
	•				DO NOT WRITE IN T	HIS SPACE
					3. Date Incorporated or Qualifed 04/13/1998	
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			65-0828309	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22	· · · · · · · · · · · · · · · · · · ·	27			- Fee Required -	
City & State	e	City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Coun	try	8. This corporation owes the current year	ır Intangible □ Yes □ No
24	25	29	30		Personal Property Tax. 10. Name and Address of New Registe	
	9. Name and Address of Curren	t Registered Agent		B1 Name		rea Agent
MON	VIOUDIS, PERRY D ESQUIRE		ľ	I I I I I I I I I I I I I I I I I I I	SAME	
4520 N.E. 18TH AVE.,STE.101				B2 Street Add	ress (P.O. Box Number is Not Acceptable)	
FT. LAUDERDALE FL 33334			ļ.	5/5	SE 715 STILLET	
	EAGDENDALE I E GOOGF		1	2	nd Floor	}
	• .		ļ.	84 City1	1-1-1-	85 Zip Çode
				1 FT.		FL 33381
11. Pursuant office or r	to the provisions of Sections 607.050; edistered agent, or both, in the State	2 and 607.1508, Florida Statute of Florida, Such change was a	es, the ab uthorized	ove-named corp by the corporation	poration submits this statement for the purpos on's board of directors. I hereby accept the a	ppointment as registered
agent. I a	m familiar with, and accept the obligat	tions of, Section 607.0505, Flo	rida Statul	tes.	,	
SIGNATURE	·					
	Signature, typed or printed name of registered agen		: Registered A	igent signature require	ADDITIONS/CHANGES TO OFFICERS	
12.	D OFFICERS AN	ID DIRECTORS	1.1 TITL	E .	ADDITIONS/CHANGES TO OFFICE IN	Change Addition
TITLE	Bracken, Steven G	C peccie	1.2 NAA			
NAME	341 BEACHWOOD DR.			EET ADDRESS		1
STREET ADDRESS	KEY BISCAYNE FL 33149			Į.		
CITY-ST-ZIP	D	□ DELETE	2.1 TITL	Y-ST-ZIP		
TITLE	BRACKEN, MICHAEL F	- Deterie	2.1 MAN			☐ Change ☐ Addition
NAME	224 WEST MASHTA DR.		4.4 NAV			Change Addition
STREET ADORESS	KEY BISCAYNE FL.33149		0.00	;		Change Addition
CITY-ST-ZIP	I. NET DISCATINE PL 33 149			EET ADDRESS	/	☐ Change ☐ Addition
TITLE		CT DELETE	2. 4 CIT	EET ADDRESS	= Dice Provident	
NAME	<u> </u>	DELETE	2. 4 CIT	EET ADDRESS	= Vice President	
STREET ADDRESS		☐ DELETE	2. 4 C/T 3.1 T/T 3.2 NAA	EET ADDRESS	= Vice President racken, Julie, W.	
		☐ DELETE	2. 4 CIT 3.1 TITL 3.2 NAA 3.3 STF	Y-ST-ZIP E ME M	= Vice fresident racken, Julie, W. 141 Beychwood Drive	
CITY-ST-ZIP			2. 4 C/T 3.1 T/T/ 3.2 NAM 3.3 S/TF 3.4. C/T	Y-ST-ZIP E AE WEET ADDRESS Y-ST-ZIP Y-ST-ZIP	= Vice fresident racken, Julie, W. syl Beychwood Drive Key Bislayre, FL 3	
CITY-ST-ZIP TITLE		☐ DELETE	2. 4 C/T 3.1 T/T 3.2 NAA 3.3 S/F 3.4. C/T 4.1 T/T	Y-ST-ZIP E AE AE EEET ADDRESS Y-ST-ZIP E F AE AE EET ADDRESS Y-ST-ZIP E	= Vice fresident racken, Julie, W. syl Beychwood Drive Key Bislayre, FL 3)	Change Maddition
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

exaisteven & Bracken