## FILË NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1997

CITY-ST-7IP



FLORIDA DEPARTMENT OF STATE

FILED

Apr 02 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F06032

SUBWAY DEVELOPMENT COMPANY OF CENTRAL FLORIDA

## Principal Place of Business Mailing Address 1700 N. MAITLAND AVENUE 1700 N. MAITLAND AVENUE MAITLAND FL 32751-3321 MATTLAND FL 32751 3. Date Incorporated or Qualified 3a. Date of Last Report 11/20/1980 05/01/1996 2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable 26 59-2453450 Sulte, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional X 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing **\$5.00** May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes X Yes \(\sigma\) No 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent DIPASQUA, CURTIS 1700 N. MAITLAND AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) MAITLAND FL 32751 83 В4 City 7ip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505. Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change TITLE Addition 1.1 TILLE NAME DIPASQUA, MICHAEL 1.2 NAME 1700 N. MAITLAND AVENUE STREET ADDRESS 1.3 STREET ADDRESS MAITLAND FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE Change Addition 2.1 HHLE NAME DIPASQUA, PETE SR 2.2 NAME 1700 N. MAITLAND AVENUE STREET ADDRESS 2.3 STHEET ADDRESS CITY-ST-ZIF Mattland fl 2 4 CHY-\$1-7IP DELETE TITLE 3 1 TITLE Change \_\_\_ Addition NAME DIPASQUA, CURTIS DI 3.2 NAME 1700 N. MAITLAND AVENUE STREET ADDRESS 3.3 STHEET ADDRESS MAITLAND FL CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE. Change Addition 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY- \$1-7IP DELETE TITLE Change Addition 5.1 TITLE 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - S1 - ZIP DELETE TITLE Change \_\_\_ Addition 6111111 NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 City - \$1 - ZiP 14. I do 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 comporation or the receive to trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 it prangue from with an address.