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PROFIT CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000047190 (1)

FIREHOUSE SUBS, INC.

FILED

Mar 18 1998 8:00am

Secretary of State

Principal Place of Business Mailing Address 10131 SAN JOSE BLVD. 10131 SAN JOSE BLVD JACKSONVILLE FL 32257 JACKSONVILLE FL 32257 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/20/1994 28. Mailing Address
26. 9850-5 SAW JOSE Blup 2. Principal Place of Business 4. FEI Number Applied For 9850-5 SANJOSE BIND 59-3250314 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing TACKSONVILLE JACKSONVILLE 28 Trust Fund Contribution Added to Fees Country Country 8. This corporation owes or has paid the current year Intangible 25 Personal Property Tax due June 30. Yes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name SORENSEN, CHRIS 10131 SAN JOSE BLVD STE 9 82 Street Address (P.O. Box Number is Not Acceptable) JACKSONVILLE FL 32257 83 84 City 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Treasurer Change Addition TITLE 1.1 TITLE Stephen C. Joost SORENSEN, ROBIN NAME 1.2 NAME 3410 kori Road 10131-9 SAN JOSE BOULEVARD 1.3 STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32257 Jacksonville, Fl CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Addition 21 TITLE Change TETLE SORENSEN, CHRIS 2.2 NAME NAME 10131-9 SAN JOSE BOULEVARD STREET ADDRESS 2.3 STREET ADDRESS JACKSONVILLE FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change ■ Addition TITLE 31 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Addition TITLE 4.1 TITLE Change NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Addition Change TITLE 5.1 TITLE NAME 5.2 NAME STREET ADORESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change □ Addition TITLE 6.1 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

14. Thereby 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 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 recoiver 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

SIGNATURE:

Stephen C. Toast

904 880-0808