

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 23, 2001 8:00 am
Secretary of State

04-23-2001 90103 043 ***150.00

DOCUMENT # P94000056113

1. Entity Name
MAG SUBWAY, INC.

Principal Place of Business
15956 WEST STATE ROAD 84
SUNRISE FL 33326
US

Mailing Address
15956 WEST STATE ROAD 84
SUNRISE FL 33326
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 65-0517339

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BELL, THOMAS P
1740 N.W. 122ND TERR.
PEMBROKE PINES FL 33026

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete
NAME AKHTER, AZIZ
STREET ADDRESS 471 SW 182 N WY WAY
CITY-ST-ZIP PEMBROKE PINE FL 33029 30

TITLE ☒ Change ☐ Addition
NAME AKHTER AZIZ
STREET ADDRESS 471 S.W. 182 WAY
CITY-ST-ZIP PEMBROKE PINES, FL-33029

TITLE D ☐ Delete
NAME AZIZ, MUHMOOD
STREET ADDRESS 3133 N.STATE RD
CITY-ST-ZIP MANGATE FL 33063 45

TITLE ☒ Change ☐ Addition
NAME AZIZ MAMOOD
STREET ADDRESS 3177 N. STATE ROAD 7
CITY-ST-ZIP MARGATE, FL-33063

TITLE D ☐ Delete
NAME KHANOWBLA, FARAZANA
STREET ADDRESS 3002 FOREST BLOCK DR
CITY-ST-ZIP SPRING TX 77373 145

TITLE ☒ Change ☐ Addition
NAME FARZANA KHANDWALA
STREET ADDRESS 11315 Rock Bridge Lane
CITY-ST-ZIP Sugar Land, TX-77478

TITLE D ☐ Delete
NAME DADA, KHATOON S
STREET ADDRESS 471 SW 182 N 4 WAT
CITY-ST-ZIP PEMBROKE PINE FL 33029 145

TITLE ☒ Change ☐ Addition
NAME DADA KHATOON S.
STREET ADDRESS 471 S.W. 182 WAY
CITY-ST-ZIP PEMBROKE PINES, FL-33029

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: AKHTER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)