## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000064749

Entity Name: SUBWAY 6680, INC.

FILED Feb 19, 2005 Secretary of State

Current Principal Place of Business:		New Principal Pla	New Principal Place of Business:		
SHOPPES 14679 SW MIAMI, FL	@ 104 104TH ST.		·		
Current Mailing Address:			New Mailing Add	New Mailing Address:	
SHOPPES 14679 SW MIAMI, FL	104TH ST.				
FEI Number:	65-1129991	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
ROY, DAVID R ESQ DAVID R. ROY, P.A. 4209 N. FEDERAL HWY. POMPANO BEACH, FL 33064 US  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.					
SIGNATUR	E:				
	Electronic	Signature of Registered Agent	:	Date	
Election Cam	paign Financing	Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHAI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () E MYSOREWALA, 10164 NW 31ST SUNRISE, FL 33	ST.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V () E GHANIWALA, WA 13036 NW 14TH PEMBROKE PINI	ST.	Title: Name: Address: City-St-Zip:	( ) Change( ) Addition	
Title: Name: Address: City-St-Zip:	T () E MOTEN, ANWAR 2863 SW 13TH D DEERFIELD BEA	PRIVE	Title: Name: Address: City-St-Zip:	( ) Change( ) Addition	
Title: Name: Address: City-St-Zip:	S ()E ABID, ABDUL A 10164 NW 31ST SUNRISE, FL 33		Title: Name: Address: City-St-Zip:	( ) Change( ) Addition	
Title: Name: Address: City-St-Zip:	D () E KARIM, MOHAMN 14679 SW 104TH MIAMI, FL		Title: Name: Address: City-St-Zip:	( ) Change( ) Addition	
Title: Name: Address: City-St-Zip:	D () E MAJID, SHAFI 14679 SW 104TH MIAMI, FL	Pelete	Title: Name: Address: City-St-Zip:	()Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ABDUL ABID S 02/19/2005