## 2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

## **DOCUMENT #696576**

1. Entity Name

56TH ST. SUBWAY, INC.



**FILED** Apr 27, 2007 08:00 A Secretary of State

Principal Place of Business

Mailing Address

8840 NO 56 STR

TEMPLE TERRACE, FL 33617

212 E. CASS ST TAMPA, FL 33602 US



## DO NOT WRITE IN THIS SPACE

CR2E034 (11/05) 01152007 No Chg-P

4. FEI Number 59-2108720 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KHAN, MASOOD K. 212 E CASS ST **TAMPA, FL 33602** 

## DO NOT WRITE IN THIS SPACE

	e named entity submits this statement for the p tions of registered agent.	ourpose of changing its registere	d office or	registered agent, or both	in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title is	applicable (NOTE Registered	Agent signatur	required when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00  9. Election Campaign Finance Trust Fund Contribution.			cing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KHAN, MASOOD K. 212 E CASS ST TAMPA, FL 33602				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST KHAN, NANCY C. 212 E CASS ST TAMPA, FL 33602			·	U00000737458 05/11/07-80028-019 150.0
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP				DO I	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN T	HIS SPACE
TITLE NAME STREET ADDRESS CITY ST. 7IP					

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

TITLE NAME STREET ADDRESS CITY-ST-ZIP



985-2899