## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS **DOCUMENT #696576** 1. Entity Name 56TH ST. SUBWAY, INC. 08 MAY 22 AM 8: 56 Principal Place of Business Mailing Address 8840 NO 56 STR 212 E. CASS ST TEMPLE TERRACE, FL 33617 US TAMPA, FL 33602 US 01152008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2108720 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent KHAN, MASOOD K. DO NOT WRITE 212 E CASS ST TAMPA, FL 33602 IN THIS SPACE 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. I am familiar with, and accept (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE KHAN, MASOOD K. 212 E CASS ST STREET ADDRESS 000130910460 06/05/08--01037--020 \*\*288.75 CITY-ST-ZIP TAMPA, FL 33602 ST TITLE KHAN, NANCY C. NAME STREET ADDRESS 212 E CASS ST CITY-ST-ZIP TAMPA, FL 33602 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP

I hereby 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:** 

NAME STREET ADDRESS CITY-ST-ZIP TITLE

STREET ADDRESS CITY-ST-ZIP

ANCY C. KOM ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR