2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2009
Secretary of State

DOCUMENT# P01000064749

Entity Name: SUBWAY 6680, INC.

Current Principal Place of Business:

SHOPPES @ 104
14679 SW 104TH ST.
MIAMI, FL 33186

New Principal Place of Business:

Current Mailing Address:

SHOPPES @ 104
14679 SW 104TH ST.
MIAMI, FL 33186

New Mailing Address:

FEI Number: 65-1129991 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROY, DAVID R ESQ
DAVID R. ROY, P.A.
4209 N. FEDERAL HWY.
POMPANO BEACH, FL 33064 US

Name and Address of New Registered Agent:

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: _____
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: MYSOREWALA, IDRIS
Address: 10164 NW 31ST ST.
City-St-Zip: SUNRISE, FL 33351

Title: V ( ) Delete
Name: GHANIWALA, WAHID
Address: 13036 NW 14TH ST.
City-St-Zip: PEMBROKE PINES, FL 33028

Title: T ( ) Delete
Name: MOTEN, ANWAR
Address: 2863 SW 13TH DRIVE
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: S ( ) Delete
Name: ABID, ABDUL A
Address: 10164 NW 31ST CT.
City-St-Zip: SUNRISE, FL 33351

Title: D ( ) Delete
Name: KARIM, MOHAMMED H
Address: 14679 SW 104TH ST.
City-St-Zip: MIAMI, FL

Title: D ( ) Delete
Name: MAJID, SHAFI
Address: 14679 SW 104TH ST.
City-St-Zip: MIAMI, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: ANWAR MOTEN D 04/13/2009
Electronic Signature of Signing Officer or Director — Date