

2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000000425

Entity Name: U.S. FRANCHISE SYSTEMS, INC.**Current Principal Place of Business:**22 SYLVAN WAY
PARSIPPANY, NJ 07054**Current Mailing Address:**22 SYLVAN WAY
PARSIPPANY, NJ 07054**FEI Number:** 58-2361501**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATE CREATIONS NETWORK INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410 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.***SIGNATURE:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	D
Name	LOEWEN, ROBERT
Address	22 SYLVAN WAY
City-State-Zip:	PARSIPPANY NJ 07054

Title	P
Name	BALLOTTI, GEOFFREY ARTHUR
Address	22 SYLVAN WAY
City-State-Zip:	PARSIPPANY NJ 07054

Title	VP
Name	WARING, MICHAEL
Address	22 SYLVAN WAY
City-State-Zip:	PARSIPPANY NJ 07054

Title	D
Name	ROSSI, NICOLA
Address	22 SYLVAN WAY
City-State-Zip:	PARSIPPANY NJ 07054

Title	TREASURER
Name	LEUENBERGER, JEFFREY R.
Address	22 SYLVAN WAY
City-State-Zip:	PARSIPPANY NJ 07054

Title	D, S
Name	NOWAK, CHRISTOPHER A.
Address	22 SYLVAN WAY
City-State-Zip:	PARSIPPANY NJ 07054

I hereby 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 all other like empowered.

SIGNATURE: NOWAK , CHRISTOPHER A**DONNA HARRISON,
ATTORNEY IN FACT****04/25/2017**_____
Electronic Signature of Signing Officer/Director Detail_____
Date