2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 18, 2005 8:00 am Secretary of State 01-18-2005 90108 005 ***150.00

DOCUMENT # F02000001741 1. Entity Name SUBURBAN FRANCHISING, INC.						01-16-2003	20100 00	,5 15	70.00
Principal Place	of Business	Mailing Address							
240 ROUTE 10 WEST WHIPPANY, NJ 07981-0206		240 ROUTE 10 WEST WHIPPANY, NJ 07981-0206			4 (EP)(EB 4)			0314	6
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			01042005	Chg-P .	CR2E034	1 (10/03)	
City & State		City & State Wh. PPany, NJ				4. FEI Number Applied For 22-3774147 Not Applicable			
Zip	Country	21p 7961-0206	USA		5. Certificate	e of Status Desired		8.75 Addi ee Required	
	6. Name and Address of Current I	Registered Agent			7. Name and	d Address of New Re	gistered Ag	ent	
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD			Name Street A	Street Address (P.O. Box Number is Not Acceptable)					
	ON, FL 33324					,			
			City				FL	Zip Code	•
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 the obligations of registered agent.									
SIGNATURE_	Signature, typed or printed name of registered agent a	and title if annicable (NOTE: Ren	stered Agent signati	ure recruend	when reinstating)		DATE		 -
	SENSONS HAND OF DESCRIPTIONS OF AGUITAGES AND ASSAULT	to the napposition. (Note: Nog	eronor - Start afficien	DIE I OCOMBO	with to the state of the	T	DATE		
Fili After Ma	E NOW!!! FEE IS \$150.00 by 1, 2005 Fee will be \$550.0				00 May Be ed to Fees				
10.	OFFICERS AND		11.		ADDITIONS	CHANGES TO OFFI			
title Namë	DP DUNN, MICHAEL J	☐ Delete	TITLE NAME				l	Change	☐ Addition
STREET ADDRESS	240 ROUTE 10 WEST	,	STREET ADDRESS						
CITY-ST-ZIP	WHIPPANY, NJ 079810206		CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MEOLA, JANICE G 240 ROUTE 10 WEST WHIPPANY, NJ 079810206	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	50 Ka 240	etary and of , Jani's Route 10 illean V .	Vice fresident ce G o west NJ 07981	7	Change Change	☐ Addition
TITLE	VTD	☐ Delete	TITLE		11 17/	100 0 / 1 = 1		☐ Change	Addition
NAME STREET ADDRESS CITY-ST_ZIP	PLANTE, ROBERT M 240 ROUTE 10 WEST WHIPPANY, NJ 079810206		STREET ADDRESS CITY-ST-ZIP						<u>-</u> · · ·
TITLE	D DANGE D	Delete	TITLE	ļ			- [☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP	EASTIN, DAVID R 240 ROUTE 10 WEST WHIPPANY, NJ 079810206	·	NAME STREET ADDRESS CITY-ST-ZIP						
TITLE	C	☐ Delete	TITLE	Con	troller	M: chael A 10 wcst NJ 0798	1	Change	☐ Addition
NAME	STIRALA, MICHAEL A		NAME STREET ADDRESS	15ti	vala,	Michael A			
STREET ADDRESS CITY+ST-ZIP	240 ROUTE 10 WEST WHIPPANY, NJ 07981		CITY-ST-ZIP	300	Couté 1	10 WC5+ NJ 0398	ıt		
TITLE		☐ Delete						Change	Addition
STREET ADDRESS			NAME STREET ADDRESS CITY-ST-ZIP						
12. I hereby of indicated	certify that the information supplied with on this report or supplemental report is	this filing does not qualify for the true and accurate and that my si	avamatica eta	ted in Se	ection 119.07(3 same legal effe)(i), Florida Statutes I ect as if made under o	further certif	y that the in	nformation or director
12. Thereby certify that the information supplied with this filling does not qualify the extension stated in 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 trusted 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 practices with all other tike empowered. SIGNATURE: SIGNA									
SIGNAT	URE:	MANUE OF SIGNING OFFICER OR D	INT. CLIAL	A5	tivala of collar	1/5/05 - Date	(975)) 503.	-9102