## 2005 FOR PROFIT CORPORATION

## Secrétary of State ANNUAL REPORT 07-06-2005 90033 001 \*\*\*150.00 DOCUMENT # H38692 1. Fotity Name RAIKEYE, INC. 66025225 Principal Place of Business Mailing Address 8616 BAYMEADOWS ROAD 8616 BAYMEADOWS ROAD JACKSONVILLE, FL 32256 JACKSONVILLE, FL 32256 2. Principal Place of Business 3. Mailing Address 4479 Deccionos Suite, Apt. #, etc. Suite, Apt. #, etc. 07052005 CR2E034 (10/03) Suite 1 City & State City & State 4. FFI Number Applied For 59-2488660 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired 32216 05 A 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent RAIKES, LARRY 8616 BAYMEADOWS RD Street Address (P.O. Box Number is Not Acceptable) 4479 Decresod Lake Pki JACKSONVILLE; FL-32256 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 Zip Code the obligations of registered agent. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Trust Fund Contribution. Added to Fees Due by September 7, 2005 OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 IITLE TITLE Change 🔲 Addition Delete RAIKES, LARRY NAME NAME 4479 Decrosed Lake Pkuy Svitel 9816 BAYMEADOWS RD STREET ADORESS STREET ADDRESS Jax Fl 32216 CITY-SI-ZIP JACKSONVILLE: FL CITY-ST-ZIP Change Addition TITLE Delate TITLE RAIKES, MITCHELL NAME NAME 4479 Decrusood Lake Pkwy Svice 1 STREET ADDRESS 8616 BAYMEADOWS RD STREET ADDRESS CITY - 51 - 71P JACKSONVILLE, FL City-S1-ZIP Jax F1 32216 TELE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP RELE Delete TITLE Crance ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE Delete ITLE ☐ Addition ☐ Chance NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the examption stated in Section 119.07(3)(i), 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 chapter 607. Florida Statutes; and that my name appears in Block 10 or Block 11 if SIGNATURE:

FILED Jul 29, 2005 8:00 am

Daytme Phone F



Larry's Giant Subs, Inc. New York Style Subs Home of the Big One!

Corporate Office:
4479 Deerwood Lake Pkwy. Ste. 1
Jacksonville, FL 32216
(904) 739-9069

July 25, 2005

Florida Dept of State Division Of Corporations P O Box 6327 Tallahassee FL 32314

## To Whom It May Concern:

Enclosed is the corrected form for our annual report/uniform business report in response to your letter dated July 11, 2005. The omission of the signature was merely accidental and has been corrected. Please process this form with the corrections. Also we would like to have the \$400.00 late fee removed as it was applied incorrectly per the conversation with Kristen from you office.

Thank you,

Larry Raikes

Larry's Giant Subs