

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 14, 2005 8:00 am
Secretary of State

02-15-2005 90025 004 ***150.00

DOCUMENT # H49572 1. Entity Name 1130 SUBWAY CORP.					
Principal Place of Business 940 SOUTH MAIN ST. BELLE GLADE FL 33430			Mailing Address 940 SOUTH MAIN ST. BELLE GLADE FL 33430		
2. Principal Place of Business		3. Mailing Address		4. FEI Number 59-2548680	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent BRENT BRENT, CAROL 1104 NORTH UMBERLAND CT W. PALM BCH FL 33411 2096 STONINGTON TER. W.P.B. FLA 33411			7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ 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 _____ <small>Signature, typed or printed name of registered agent, and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>					
<div style="display: flex; justify-content: space-between;"> <div> FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee Will Be \$550.00 Make Check Payable to Florida Department of State </div> <div> 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees </div> </div>					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P BRENT, CAROL 1104 NORTH UMBERLAND CT W. PALM BCH FL 33411 2096 STONINGTON TER. W.P.B. FLA 33411		TITLE NAME STREET ADDRESS CITY - ST - ZIP	P BRENT, CAROL 2096 STONINGTON TER. W.P.B. FLA 33411	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T BRENT, RICHARD 1104 NORTH UMBERLAND CT W. PALM BCH FL 33411 2096 STONINGTON TER. W.P.B. FLA 33411		TITLE NAME STREET ADDRESS CITY - ST - ZIP	T BRENT, RICHARD 2096 STONINGTON TER. W.P.B. FLA 33411	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	JPS MAX, AUSTIER 232 REX CT LAKE WORTH FL 33461		TITLE NAME STREET ADDRESS CITY - ST - ZIP		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption 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 changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: _____ 3/14/05 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					