

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

APPROVED
AND
FILED

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
JENNIFER B. MURPHY
Secretary of State
TALLAHASSEE, FLORIDA 32399-0001

RECEIVED
MAY - 1 1996
TALLAHASSEE, FLORIDA

DOCUMENT # **H97209**

(1)

1. Corporation Name:

SAN JUAN SUBWAY, INC.

2. Principal Place of Business:

**813 LOMAX ST
JACKSONVILLE FL 32204
US**

3. Mailing Address:

**949 ARLINGTON ROAD
JACKSONVILLE FL 32211**

(DO NOT WRITE IN THIS SPACE)

3. Date of Incorporation or Qualification: **02/03/1986**

3a. Date of Last Report: **04/29/1994**

2. Principal Place of Business:

21. Suite, Apt. #, etc.

2b. Mailing Address:

26. Suite, Apt. #, etc.

22. City, State:

27. City, State:

23. Zip:

28. Zip:

24. Telephone:

25. Telephone:

29. Telephone:

30. Telephone:

4. FIC Number: **59-2643857**

Aggrent Fee
Not Applicable

5. Certificate of Status Desired: ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Fund Contribution: ☐

**\$5.00 May Be
Added to Fees**

8. Has corporation been liable for delinquency for 1994-1995?
Florida Statutes: ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**FRANCO, PHILIP H.
949 ARLINGTON RD
JACKSONVILLE FL 32211**

81. Name:

82. Street Address (P.O. Box Number is Not Acceptable):

83. City, State:

84. Zip:

FL

85. Zip Code:

11. Pursuant to the provisions of law being enforced and the Florida Statutes, the undersigned corporation hereby states that the purpose of changing its registered office or registered agent is to be in the State of Florida. Such change was authorized by the corporation and the undersigned hereby accepts the appointment as registered agent. I am familiar with and accept the obligations of such as set forth in the Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

NAME
STREET ADDRESS
CITY, STATE, ZIP

**P
FRANCO, PHILIP H.
949 ARLINGTON RD
JACKSONVILLE FL**

NAME
STREET ADDRESS
CITY, STATE, ZIP

**ST
FRANCO, FRED
702 NO 7 HWY
BLUE SPRINGS MO**

NAME
STREET ADDRESS
CITY, STATE, ZIP

**V
ADAMS, WALTER E.
2522 FARRIER LN.
RESTON VA**

NAME
STREET ADDRESS
CITY, STATE, ZIP

NAME
STREET ADDRESS
CITY, STATE, ZIP

NAME
STREET ADDRESS
CITY, STATE, ZIP

SIGNATURE: *Philip H. Franco* Philip H. Franco
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/20/95

904-721-2338