FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H97209 (1)

SAN JUAN SUBWAY, INC.

FILED May 20 1998 8:00am Secretary of State



Principal Place of Business Mailing Address							911 91 911 91911 9	INTERNATION	I 81811 IBBI
813 LOMAK ST JACKSONVILLE FL 32205 US		949 ARLINGTON ROAD JACKSONVILLE FL 3221	949 ARLINGTON ROAD JACKSONVILLE FL 32211			DO NOT WRIT	E IN THIS S	PACE	
						 Date Incorporated or Qualified 02/03/1986 			
2. Principal Pla	ace of Business	2a. Mailing Address				4. FEI Number	Applied For		
21		Suite Apl # ete	· • · - · - · · · · · · · · · · · ·			<u>59-2643857</u>			t Applicable
Suite, Apt #, etc		27 Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & State			6. Election Campaign Financing		\$5.00	•	
3		28	1 6.			Trust Fund Contribution	<u> </u>	Added 1	••••
Z ip ⊒	Country	Zιρ	30 Cou	ritry		 This corporation owes or has personal Property Tax due Jun 			angible] No
4	25 Name and Address of Curre	29 Int Registered Agent	1301			10. Name and Address of New R			
FRA	NCO, PHILIP H.			B1	Name	191	z		
949 ARLINGTON RD				82	Street Adv	dress (P.O. Box Number is Not Accepta	ible)		
	KSONVILLE FL 32211			62	Sileet Aut	Address (F.O. Box Number is Not Acceptable)			
4,10			l	63					
			ŀ	84	City			85 Zip (Code
					-	rporation submits this statement for the	FL		
	Signature typed or protection in a of registered a	gest and tile if applicable (NO ND DIRECTORS	11 · Registered	d Age	nt signature req	uired when reinstating) ADDITIONS/CHANGES TO OFF	DATE	DIRECTOR	RS IN 12
12.	P	DELETE	1,1 70	TLE		ADDITIONS/OFFARGES TO OFF		Change	Addition
NAME	FRANÇO, PHILIP H.		1.2 NA						
STREET ADDRESS	949 ARLINGTON RD			REET	ADDRESS				
CITY-ST-ZIP	JACKSONVILLE FL				T- Z IP				
TITLE	ST ST	DELETE						Change	☐ Addition
NAME	FRANCO, FRED			AME					
STREET ADDRESS	702 NO 7 HWY		2.3 ST	2.3 STREET ADDRESS					
CITY-ST-ZIP	BLUE SPRINGS MO				ST-ZIP			Change	☐ Addition
TITLE	ADAMS WALTER E			TLE				Change	L Addition
NAME	ADAMS, WALTER E. 2522 FARRIER LN.		3.2 NA		ADDRESS				
STREET ADDRESS	RESTON VA								
CITY-SI-ZIP TITLE	DELETE			3.4. CITY - ST - ZIP 4.1 TIBLE			•	Change	Addition
NAME		_	4.2 N						
STREET ADDRESS			1		ADDRESS				
CITY+ST-ZiP			4.4 C	TY-S	T-71P				
TITLE		DELETE	5.1 11	1LE				Change	Addition
NAME			5.2 N/	AME					
STREET ADDRESS			5.3 ST	reet	ADDRESS				
CITY-ST-ZIP		NP: FFF			T-ZIP			Change	Addition
TITLE		☐ DELETE	6.1 TI					Change	Addition
NAME			6.2 N/		4000F00				
STREET ADDRESS					ADDRESS				
14 hereby c	artify that the information supplied	with this filing does not qualify	for the exe	ame	T-ZIP tion stated i	in Section 119.07(3)(i), Florida Statutes.	I further cer	tify that the	information
indicated of officer or of	on thi e annual roport or supplemen	ital annual report is tr ue and ac ceiver or trustee emp owered to	CUITATE AN	d tha	at mv sional	ture shall have the same legal effect as quired by Chapter 607, Florida Statutes	it made und	ser oatn: th	ariam an