## 2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

CITY-ST-ZIP

SIGNATURE

## Mar 24, 2006 08:00 AM Secretary of State DOCUMENT # J12303 1. Enlity Name SUBWAY 757, INC, Principal Place of Business Mailing Address 137 S FEDERAL HMY 137 S FEDERAL HWY DANIA, FL 33004 US DANIA, FL 33004 03082006 No Cho-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2701501 Not Applicable \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent MARSHALL, WILLIAM J. JR. DO NOT WRITE 615 SE 12TH TERRACE FT. LAUDERDALE, FL 33301 IN THIS SPACE 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 and title if applicable. INOTE: Repistered Apent signature required when reinstation) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees <u> Hadoon479163</u> OFFICERS AND DIRECTORS 10. <u>04/08/08-80034-005 150.00</u> TITLE MARSHALL, WILLIAM J. JR. NAME STREET ADDRESS 615 SE 12TH TERRACE FT. LAUDERDALE, FL. CITY-ST-ZIP TITLE MAME STREET ADDRESS City-\$7-157 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS City-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statules. 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.

Date

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**FILED**