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May 08 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J37143 (1)

1. Corporation Name
FRESH BITE SUBS, INC.

Principal Place of Business	Mailing Address
3005 S.W. MARTIN DOWNS BLVD. PALM CITY FL 34990	3005 S.W. MARTIN DOWNS BLVD. PALM CITY FL 34990-2644

3. Date Incorporated or Qualified: 10/09/1986
3a. Date of Last Report: 05/01/1996
4. FEI Number: 59-2737443 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 2870 MARTIN DOWNS BLVD.	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 PALM CITY FL. 34994	City & State 28
Zip 24 34990 Country 25 MARTIN	Zip 29 Country 30

9. Name and Address of Current Registered Agent
FLYNN, MICHAEL
315 DYER DRIVE
STUART FL 34994

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes

SIGNATURE Michael Flynn 4/26/97
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	PVTS	☐ DELETE
NAME	FLYNN, MICHAEL	
STREET ADDRESS	315 DYER DR.	
CITY-ST-ZIP	STUART FL 34994	
TITLE	D	☐ DELETE
NAME	FLYNN, MICHAEL	
STREET ADDRESS	315 DYER DR.	
CITY-ST-ZIP	STUART FL 34994	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

CR2E034 (9/96)

14. I do hereby certify that the information supplied with this filing does not qualify for exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE: [illegible] Michael FLYNN 4/26/97 (561) 288-3630