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

PROFIT CORPORATION ANNUAL REPORT

1998

NAME

STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J62252

(8)

SUBWAY OF PORT ORANGE, INC.

FILED

May 19 1998 8:00am

Secretary of State

Principal Plac	ce of Business	Mailing Address			I JORIJAM DISAR DISAR LIANTA LIANTA DESID INDI AJMII DII	IEG MINGE MEMEL MEMEL MINDE ANNE
1 '		<u> </u>				
3781-N S NOVA RD PORT ORANGE FL 32119		3781-N S NOVA RD PORT ORANGE FL 32119				
		TOTT STRINGE PE SELVE			DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
					03/11/1987	
2. Principal F	Place of Business	2a. Mailing Address		4, FEI Number	Applied For	
21		26		59-2802094	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 Additional	
22		27		5, Certificate of Status Desired	Fee Required	
City & State		City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees	
Zip	Country Zip		Cou	ntry	8. This corporation owes or has paid the co	urrent year Intangible
24	25	29	30		Personal Property Tax due June 30.	Yes No
g. Name and Address of Current Registered Agent					10. Name and Address of New Registered	l Agent
GL	JTIERREZ, RICARDO		·	B1 Name		
5723 STEWART AVENUE			Í	82 Street Add	dress (P.O. Box Number is Not Acceptable)	
PORT ORANGE FL 32127				Slied Auc	diess (F.O. Box Mulliber is Not Acceptable)	
TOTAL OF THE SELECTION			ľ	63		······································
				84 City	Fi	85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named co						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.						
agent. i a	am ta miliar with, and accopt the oblig	ations of, Section 607,0505, FR	orida Stati	ites.		
SIGNATURE	Signature, typed or practed name of registered ago	and most tall of any Leibble JNOT	1 Bagistored	Appet signature requ	uired when reinstating) DATE	
12.		D DIRECTORS	13.	Agrill Signature requ	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE	PVD	DELETE	1.1 [[LF	ADDITIONO OF INTEGER TO OFFICE IN	Change Addition
NAME	GUTIERREZ, RICARDO		1.2 NA			
STREET ADDRESS	5723 STEWART AVENUE			REET ADDRESS		
CITY-ST-ZIP	PORT ORANGE FL					1
TITLE	8D	DELETE	2.1 TII	Y-ST-ZIP		Change Addition
	GUTIERREZ, RICARDO	L. DECEIL				T suggest T voggon
NAME	5723 STEWART AVENUE		2.2 NA	ſ		1
STREET ADDRESS	PORT ORANGE FL			REET ADDRESS		
CITY-ST-ZIP	FOR OWNER	DELETE		TY-ST-ZIP		Change Addition
TITLE		[_] NETELE	31111	i		Change Addition
NAME			3 2 NA			
STREET ADDRESS			3.3 STI	REET ADDRESS		. [
CITY-ST-ZIP				TY-ST-ZIP		
TITLE	_	DELETE	4.1 TI	LE		Change Addition
NAME	-		4. 2 N	IME		
STREET ADDRESS			4.3 ST	HEET ADDRESS		
ÇITY-ST-ZIP	<u> </u>		4.4 0(1	Y-ST-ZIP		
TITLE		DELETE	5.1 1/1	LĒ		Change Addition
NAME			5.2 NA	ме		
STREET ADDRESS			5.3 STI	REET ADDRESS		
CITY-ST-ZIP			1	Y-ST-ZIP		
TITLE		DELETE	6.1 TiT			Change Addition

6.2 NAME

14. 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 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.