2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # K28584

1. Entity Name
SUBWAY 4144, INC. C/O MAKVIN
SAGER

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 MAY 23 PM 3:38

Principal Place of Business	Mailing Address
13036 NW 31ST STREET PEMBROKE PINES, FL 33028 US	13036 NW 31ST STREET PEMBROKE PINES, FL 33028 US

05192005 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
13036 NW 14th Street	13036 NW 14th Street
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Pembroke Pines, FL	City & State: Pembroke Pines, FL
Zip: 33028 Country: USA	Zip: 33028 Country: USA

4. FEI Number 65-0057585 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
GHANIWALA, WAHID 13036 NW 31ST STREET PEMBROKE PINES, FL 33028	Name Street Address (P.O. Box Number is Not Acceptable): 13036 NW 14th Street City: Pembroke Pines FL Zip Code: 33028

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: Wahed Ghaniwala

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Amended AR is $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PATEL, ABUBKR S 239 NE 167TH STREET N MIAMI BCH, FL 33162	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P GHANIWALA, WAHID 13036 NW 31ST STREET PEMBROKE PINES, FL 33028	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 13036 NW 14th Street Pembroke Pines, FL 33028
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SAMANA, GHAZI 239 NE 167TH STREET N MIAMI BCH, FL 33162	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S SAEED, ARSHED 7181 SW 20TH PLACE DAVIE, FL 33317	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 200055656582 06/02/05--01031--013 **61.25
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SOORTY, MOHAMEED ARIF 239 NE 167TH STREET N MIAMI BCH, FL 33162	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. 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 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.

SIGNATURE: Wahed Ghaniwala

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #