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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L11104

(1)

BLIMPIE CAPITAL VENTURE, INC.

Principal Place of Business Mailing Address					<u></u>				
801 NE 187TH STREET SUITE 300 N. MIAMI BCH FL 33607			P.O. BOX 688305 DUNWOODY GA 30356-0305 US						
						3. Date Incorporated or Qualified 3a. Date of Last Repor 08/24/1989 05/01/1996			port
2. Principal Place of Business			2a. Mailing Address			4. FEI Number			lied For
21			26 P.O. BOX 888287			58-1993440 Not Applica			Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc. 27			5. Certificate of Status Desired	∑	8.75 Ad Fee Req	
City & State			City & State 28 DUNWOODY, GA			Election Campaign Financing Trust Fund Contribution		\$5.00 N Added to	
Zip 24	Country 25		7ip Country 29 30356-028730 US			8. This corporation has liability for intangible tax under s. 199.032. Florida Statutes Yes X No			
	9, Name and Ad	dress of Current	Registered Agent			10. Name and Address of New Re	gistered Age	ent	
UNI	TED CORPORATE	SERVICES, INC.			B1 Name				
801 NORTHEAST 167TH STREET					B2 Street Ad	dress (P.O. Box Number is Not Acceptab	ole)		
SUITE 300									
NORTH MIAMI BEACH FL 33162					83				
					B4 City		FL	35 Zip Co	ode
11. Pursuant office or a agent. I a	to the provisions of S registered agent, or t am familiar with, and a	sections 607.0502 a both, in the State of accopt the obligation	and 607.1508, Florida Statut Florida: Such change was a ons of, Section 607.0505, Flo	es, the ab authorized orida Statu	ove-named co by the corporates.	orporation submits this statement for the pration's board of directors. I hereby accept	urpose of ch at the appoint	anging its Iment as re	registered egistered
SIGNATURE									
12.	Signature, typed or printed i	OFFICERS AND I			Agent signature rec	tuired when reinstating)	DATE		
TITLE	P	OFFICERS AND I	DIRECTORS	13. 1.17(1)		ADDITIONS/CHANGES TO OFFIC			IN 12 Addition
NAME	SIEGEL, DAVID L		La occere	1.2 NA	1			Change	Addition
STREET ADDRESS	740 BROADWAY			EET ADDRESS					
CITY-ST-ZIP	NEW YORK NY		i i		Y-ST-ZIP				
TITLE				2.1 1110	+		Π	Change	Addition
NAME	POMPEO, PATRICK			2.2 NAM				0.	
STREET ADDRESS	740 BROADWAY			2.3 \$16	EE1 ADDRESS				
CITY-ST-ZIP	NEW YORK NY			2. 4 CH	Y-S1-ZIP				
TITLE	\$ DELETE			3.1 TITI	.E			Change	Addition
NAME	LEANESS, CHAR	LES		3.2 NA	AE.				
STREET ADDRESS	740 BROADWAY			3 3 STR	EET ADDRESS				
CITY-ST-ZIP	NEW YORK NY		·	3.4. CIT	Y-\$1-7IP				
TITLE	TAS		DELETE	4.1 1170	ŧ T			Change	Addition
NAME	SITKOFF, ROBER			4. 2 NA	ME				
STREET ADDRESS	1775 THE EXCH	ANGE		4.3 S1H	EET ADDRESS				
CITY-ST-ZIP	ATLANTA GA			4.4 CIT	7-S1-ZIP				
TITLE	i		DELETE	5.1.7(1)	L			Change	Addition

14. I do hereby certify that the information supplied with this filing tools 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 supplied under each; that I am an officer or director of the opportunity or the type or this term of the execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 in charge of or on all attachment with an address.

5.2 NAME

6.1 TITLE

G.2 NAME

DELETE

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST - ZIP

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

4/22/07

770 004 2707

___ Addition

FILED

Apr 29 1997 8:00am

Secretary of State