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CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Landra B. Mathiam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **L28222**

(2)

1. Corporation Name
DIPASQUA SUBWAY NO. 339, INC.

CREW VALLEY STATE
MADISONVILLE, TENNESSEE

Principal Place of Business
**2131 E SEMORAN BLVD
APOPKA FL 32703
US**

Main Address
**167 LOOKOUT PLACE
MAITLAND FL 32751**

(DO NOT WRITE IN THIS SPACE)

2. Foreign principal address		2a. Mailing Address		3. Date incorporated or qualified	3a. Date of Last Report
21		26		11/06/1989	05/01/1994
2. State, Apt # etc.		2a. State, Apt # etc.		4. FEI Number	Applied For
22		27		59-2977738	Not Applicable
City & State		City & State		5. Certificate of Status Desired	\$8.75 Additional Fee Required
23		28		<input type="checkbox"/>	
Zip		Zip		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24		25		7. This corporation has liability for intangible tax under R. 194(1), Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	
25		29		30	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
DIPASQUA ENTERPRISES 167 LOOKOUT PLACE MAITLAND FL 32751				B1 Name			
				B2 Street Address (P.O. Box Numbers Not Acceptable)			
				B3			
				B4 City, FL , B5 Zip Code			

11. Pursuant to the provisions of Sections 607.1502 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 607.0905, Florida Statutes.

SIGNATURE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN '94	
12.1 NAME	D DIPASQUA, LUCY 167 LOOKOUT PLACE MAITLAND FL	13.1 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.2 NAME	D DIPASQUA, PETER JR. 167 LOOKOUT PLACE MAITLAND FL	13.2 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.3 NAME	D GANSSE, JEFFREY 167 LOOKOUT PLACE MAITLAND FL	13.3 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.4 NAME		13.4 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.5 NAME		13.5 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.6 NAME		13.6 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and shows and equals for the information stated in Section 607.0904, Florida Statutes. I further certify that the information included 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 in the state that I am an officer or director of this corporation or that my name is included in the report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report or is an additional officer with an address.

SIGNATURE: *Lucy de Pasqua*
SIGNATURE AND TYPED OR PRINTED NAME OF DOMESTIC OFFICER OR DIRECTOR