

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **L87727** (8)

1. Corporation Name

SAWGRASS SUBWAY INC.



Principal Place of Business

**1061 SW 75 AVENUE
3419 HIATUS RD
PLANTATION FL 33317**

Mailing Address

**1061 SW 75 AVENUE
3419 HIATUS RD
PLANTATION FL 33317**

3. Date Incorporated or Qualified
07/02/1990

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

65-0214201

Applied For

Not Applicable

22

Suite, Apt. #, etc.

Suite, Apt. #, etc.

23

City & State

27

City & State

24

Zip

Country

28

Zip

Country

25

29

Zip

Country

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**ZIMMERMAN, BOB L.
3419 HIATUS RD
SUNRISE FL 33321**

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

[Signature]

(Print Name of Registered Agent Signature required when not filed)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **ZIMMERMAN, BOB L.**
STREET ADDRESS **1061 SW 75TH AVE**
CITY-ST-ZIP **PLANTATION FL**

TITLE ☐ DELETE

NAME **ZIMMERMAN, SON CHA**
STREET ADDRESS **1061 SW 75TH AVE**
CITY-ST-ZIP **PLANTATION FL**

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

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

15

16 TITLE

17 NAME

18 STREET ADDRESS

19 CITY-ST-ZIP

20

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

25

26 TITLE

27 NAME

28 STREET ADDRESS

29 CITY-ST-ZIP

30

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

35

36 TITLE

37 NAME

38 STREET ADDRESS

39 CITY-ST-ZIP

40

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/96 954-584-0016
DATE Filing Fee

CR2E034 (12/95)