

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **L96086** (8)

1. Corporation Name

MIAMI SUBS USA, INC.



Principal Place of Business

Mailing Address

**6300 NW 31ST AVE.
FT. LAUDERDALE FL 33309**

**6300 NW 31ST AVE.
FT. LAUDERDALE FL 33309**

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**ECONOMOU, CHRIS A
6300 N.W. 31ST AVENUE
FT. LAUDERDALE FL 33309**

81 Name

Frank M. Puthoff

82 Street Address (P.O. Box Number is Not Acceptable)

6300 NW 31st Avenue

83

84 City

Ft. Lauderdale

FL

85 Zip Code

33309

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 to comply with the Statute 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 of officer or director of corporation and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **D** ☒ DELETE
NAME **BOULIS, GUS**
STREET ADDRESS **6300 NW 31ST AVE.**
CITY-STATE-ZIP **FT. LAUDERDALE FL 33309**

1.1 TITLE **DP** ☐ Change ☒ Addition
1.2 NAME **Russo, Thomas J.**
1.3 STREET ADDRESS **6300 NW 31st Ave**
1.4 CITY-STATE-ZIP **Ft. Lauderdale FL**

TITLE **DSV** ☒ DELETE
NAME **ECONOMOU, CHRIS A**
STREET ADDRESS **6300 NW 31ST AVE.**
CITY-STATE-ZIP **FT. LAUDERDALE FL**

2.1 TITLE **DV** ☐ Change ☒ Addition
2.2 NAME **Woda, Jerry**
2.3 STREET ADDRESS **6300 NW 31st Ave**
2.4 CITY-STATE-ZIP **Ft. Lauderdale FL**

TITLE **V** ☐ DELETE
NAME **PERLYN, DONALD F.**
STREET ADDRESS **6300 NW 31ST AVENUE**
CITY-STATE-ZIP **FT LAUDERDALE FL**

3.1 TITLE **DVS** ☐ Change ☒ Addition
3.2 NAME **Puthoff, Frank M.**
3.3 STREET ADDRESS **6300 NW 31st Ave**
3.4 CITY-STATE-ZIP **Ft. Lauderdale FL**

TITLE **D** ☒ DELETE
NAME **HREN, MARGARET**
STREET ADDRESS **6300 NW 31ST AVENUE**
CITY-STATE-ZIP **FT LAUDERDALE FL**

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-STATE-ZIP

TITLE **D** ☒ DELETE
NAME **BARTSOCAS, KIKI**
STREET ADDRESS **6300 NW 31ST AVENUE**
CITY-STATE-ZIP **FT LAUDERDALE FL**

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-STATE-ZIP

TITLE **V** ☒ DELETE
NAME **KOLMAN, RICHARD**
STREET ADDRESS **6300 NW 31ST AVENUE**
CITY-STATE-ZIP **FT LAUDERDALE FL**

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-STATE-ZIP

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:

By:

Frank M. Puthoff, VP/S

(954) 973-0000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR2E034 (12/95)