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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L96086

1. Corporation Name

MIAMI SUBS USA, INC.

FILED May 05, 1999 8:00 am Secretary of State

05-05-1999 90008 003 ***158.75



Principal Place of Business Mailing A	ddress			T THE STATE OF THE PRINTING STATES OF THE PRI	INS CHIL ELEVI OF	NII EIKII OIDII	DIBLE BIBLE FORE
6300 NW 31ST AVE. 6300 NW 31ST AVE.							
FT. LAUDERDALE FL 33309 FT. LAUDERDALE FL 33309					FF 13. T(1/0	22105	
				DO NOT WRIT	E IN THIS	SPACE	
				3. Date Incorporated or Qualifed 08/28/1990			
2. Principal Place of Business 2a. Mailin	n Addraec			4. FEI Number		$\overline{\Box}$	oplied For
<u> </u>	g Address			65-0220357			ot Applicable
	Apt. #, etc.				£		Additional
22 27	•			5. Certifcate of Status Desired	#	Fee R	equired
	State			6. Election Campaign Financing		\$5.00	May Be
23				Trust Fund Contribution		Added	to Fees
Zip Country Zip	c	ountry		8. This corporation owes the curre	ent year Inta		
4 25 29 30				Personal Property Tax.		Ves	□No
9. Name and Address of Current Registered A	Agent	-	N 1	10. Name and Address of New R	legistered A	lgent	
WODA, JERRY W.		81	Name				
6300 NW 31ST AVE		82	Street Addre	dress (P.O. Box Number is Not Acceptable)			
FT. LAUDERDALE FL 33309		83					
The togetherme to doord		63					
		84	City		FL	85 Zip	Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508	9 Florida Statutos tha	abovo	named corne	ration submits this statement for the		changing it	s registered
office or registered agent, or both, in the State of Florida. Sucl agent. I am familiar with, and accept the obligations of, Section	h change was authoriz	ed by t	he corporation	's board of directors. I hereby accep	t the appoin	tment as r	egistered
SIGNATURE							1
Signature, typed or printed name of registered agent and title if applicab		red Agent	signature required		DATE		
12. OFFICERS AND DIRECTORS			 -	ADDITIONS/CHANGES TO OF	FICERS AN	D DIRECT: ☐ Change	ORS IN 12 ☐ Addition
TITLE VP	7-	TITLE				Change	L] Addition
COOR ANN CACT AVE	BARTSOCAS, GUS			Phone .			
CT LAUDEDDALE CL			ADDRESS				
CITY-ST-ZIP FT. LAUDERDALE FL. TITLE DVST	A	CITY-ST	-ZIP			Change	☐ Addition
1 =		NAME					[
STREET ADDRESS 6300 NW 31ST AVE.							1
	23		ADDRESS				1
OTV ST 7ID FT LALINERNALE FI		STREET	ADDRESS			_ ,	
CITY-ST-ZIP FT. LAUDERDALE FL	2.4		r-ZIP			Change	Addition
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NAME PERLYN, DONALD F.	2.4 DELETE 3.1 3.2	STREET 4 CITY-ST 1 TITLE 2 NAME	r-ZIP			Change	☐ Addition
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indicated on this annual report or supplied with this liming does not quality for the exemption stated in Section 19.07(5)(f), Florida Statutes. In order certify that the information indicated on this annual report for 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 or an attachment with an address, with all other like empowered.

SIGNATURE: