2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2004 8:00 am
Secretary of State
04-22-2004 90041 036 ***150.00

DOCUMENT # L96086

1. Entity 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

94060265

04072004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0220357
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

B&C CORPORATE SERVICES
201 SOUTH BISCAYNE BLVD, SUITE 3000
MIAMI, FL 33131

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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DVST
NAME	WODA, JERRY
STREET ADDRESS	6300 NW 31ST AVE.
CITY-ST-ZIP	FT. LAUDERDALE, FL 33309
TITLE	PD
NAME	PERLYN, DONALD F.
STREET ADDRESS	6300 NW 31ST AVENUE
CITY-ST-ZIP	FT LAUDERDALE, FL 33309
TITLE	CCEO
NAME	LORBER, HOWARD
STREET ADDRESS	1400 OLD COUNTRY ROAD
CITY-ST-ZIP	WESTBURY, NY 11590
TITLE	EV
NAME	PALEY, CARL
STREET ADDRESS	1400 OLD COUNTRY ROAD
CITY-ST-ZIP	WESTBURY, NY 11590
TITLE	SRFR
NAME	PALEY, CARL
STREET ADDRESS	1400 OLD COUNTRY ROAD
CITY-ST-ZIP	WESTBURY, NY 11590
TITLE	VTAS
NAME	DEVOS, RONALD
STREET ADDRESS	1400 OLD COUNTRY ROAD
CITY-ST-ZIP	WESTBURY, NY 11590

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ V.P. 4/19/04 9549730000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #