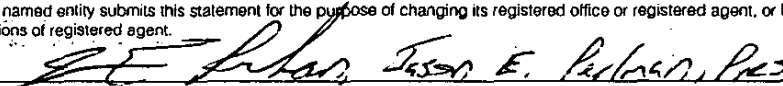
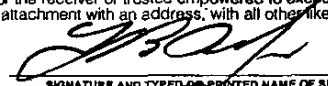


FILED
Mar 31, 2008 8:00 am
Secretary of State

03-31-2008 90031 010 ***150.00

2008 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # L96086			
1. Entity Name MIAMI SUBS USA, INC.			
Principal Place of Business 6300 NW 31ST AVE. FT. LAUDERDALE, FL 33309		Mailing Address 6300 NW 31ST AVE. FT. LAUDERDALE, FL 33309	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
		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, INC. ONE BISCAYNE TOWER, 21ST FL 2 SOUTH BISCAYNE BLVD MIAMI, FL 33131		7. Name and Address of New Registered Agent Name PERLMAN YEYOLI & ALBRIGHT Street Address (P.O. Box Number is Not Acceptable) 200 SOUTH ANDREWS AVE. SUITE 600 City FT LAUDERDALE FL Zip Code 33301	
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  3/19/08 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	COB LORBER, HOWARD 1400 OLD COUNTY RD SUITE 400 WESTBURY, NY 11590 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VOGEL, BERNARD H 6300 NW 31ST AVE. FT. LAUDERDALE, FL 33309 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCOO PERLYN, DONALD 6300 NW 31ST AVE FORT LAUDERDALE, FL 33309 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CHWATT, GLENN 6300 NW 31ST AVE. FT. LAUDERDALE, FL 33309 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DEVP NORBITZ, WAYNE 1400 OLD COUNTY RD SUITE 400 WESTBURY, NY 11590 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HERMAN, GARY 720 5TH AVE., 10TH FLOOR NEW YORK, NY 10019 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTAS DEVOS, RONALD 1400 OLD COUNTY RD SUITE 400 WESTBURY, NY 11590 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS WODA, JERRY 6300 NW 31ST AVE FORT LAUDERDALE, FL 33309 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO GATOFF, ERIC 1400 OLD COUNTY RD SUITE 400 WESTBURY, NY 11590 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: 		03/18/08 954.973.0000 Date Daytime Phone #	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			