2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # M89348 1. Entity Name

TOWN 'N COUNTRY SUBWAY, INC.



Principal Place of Business

8019 W HILLSBOROUGH TAMPA, FL 33634 US Mailing Address

212 E CASS STREET TAMPA, FL 33602 US

FILED May 01, 2008 08:00 AN Secretary of State



DO NOT WRITE IN THIS SPACE

01152008 No Chg-P CR2E034 (11/05)

Applied For 4. FEI Number 59-2894960 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KHAN, MASOOD K 212 E CASS STREET TAMPA, FL 33602

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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, 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

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10. OFFICERS AND DIRECTORS THILE NAME KHAN, MASOOD K. 212 E CASS STREET STREET ADDRESS CiTY-ST-ZIP TAMPA, FL 33602 TITLE KHAN, NANCY C. 212 E CASS STREET STREET ADDRESS CITY-ST-ZIP TAMPA, FL 33602 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

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12. Thereby 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.

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

NING OFFICER OR DIRECTOR