

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

08 MAY 22 AM 11:23

DOCUMENT # M97183

1. Entity Name
DOWNTOWN SUBWAY, INC.



Principal Place of Business
212 E MADISON
TAMPA, FL 33601 US

Mailing Address
212 E CASS STREET
TAMPA, FL 33602 US

DO NOT WRITE IN THIS SPACE



01152008 No Chg-P CR2E034 (11/05)

4. FEI Number
59-2895072

Applied For
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

**DO NOT WRITE
IN THIS SPACE**

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 _____ (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

TITLE	P
NAME	KHAN, MASOOD K
STREET ADDRESS	212 E CASS STREET
CITY-ST-ZIP	TAMPA, FL 33602
TITLE	ST
NAME	KHAN, NANCY C.
STREET ADDRESS	212 E CASS STREET
CITY-ST-ZIP	TAMPA, FL 33602
TITLE	D
NAME	KHAN, YASMEEN E.
STREET ADDRESS	212 E CASS STREET
CITY-ST-ZIP	TAMPA, FL 33602
TITLE	D
NAME	KHAN, SOOFIA S
STREET ADDRESS	212 E CASS STREET
CITY-ST-ZIP	TAMPA, FL 33602
TITLE	D
NAME	KHAN, KHALID J
STREET ADDRESS	212 E CASS STREET
CITY-ST-ZIP	TAMPA, FL 33602
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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06/05/08--01006--022 **427.50

**DO NOT WRITE
IN THIS SPACE**

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: Nancy C. Khan
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/08
Date

813 985 2899
Daytime Phone #

5/22/08