## 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

changed, or on an attachment

SIGNATURE:

## Mar 15, 2005 8:00 am **Secretary of State** DOCUMENT # P01000013054 1. Entity Name 03-15-2005 90021 005 \*\*\*150.00 NORTH PALM BEACH SUBWAY, INC. \* Principal Place of Business Mailing Address 7473 N 4 ST PLANTATION FL 33317 7473 N 4 ST PLANTATION FL 33317 2. Principal Place of Business STAGET 3. Mailing Address 7473 N.W. 4 STIFET Suite, Apt. #, etc. CR2E034 (10/04) Cjty & State City & State 4. FEI Number Applied For 65-1073066 MONTATION Not Applicable \$8.75 Additional 331 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent COCTWOW H. Robek KOLTNOW, H ROBERT Street Address (P.O. Box Number is Not Acceptable) 7473 N 4 ST PLANTATION FL 33317 7473 N.W. 4 STIGET LANTATION 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) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10 11. TITLE Defete TITLE 轡 ☐ Change Addition KOLTNOW, WILLIAM J NAME NAME STREET ADDRESS 3427-34TH WAY STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH FL 33409 CITY-ST-ZIP TITLE ☐ Delete TITLE ✓ Change KOLTNOW, HIDOBERT 7473 N.W. 4 STREET PLONTATION, FL 33317 ☐ Addition KOLTNOW, H ROBERT STREET ADDRESS 7473 N 4 ST STREET ADDRESS CITY-ST-ZIP PLANTATION FL 33317 CITY-ST-ZIP HHÉ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P 12. I hereby certify that the information supplied with this filing does not quality 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 empoyand to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

RKOLTHOW

FILED