8/25/2002-90217-0

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2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT#

P01000064753 1. Entity Name
SUBWAY 3783, INC.

Spile, Apt. 4, etc. Suite, Ap					V								
TIMES BY LOTHER ST. INDIAN P. F. INDIAN P.	Principal Pla	ice of Business	Mailing Address										
MANA PL PROPOSIT Place of Business 3. Moving Activess Sure, Apt. #, etc. DO NOT WRITE IN THIS SPACE	KILLIAN PKV	VY,	KILLIAN PKWY.			1					1		
E. Principal Place of Supiness Sarea, Apt. 9, etc. Coy. A. Saise City, A. Saise Saise, Apt. 9, etc. Country E. C	10846 SW 10	OFTH ST.	10846 SW 104TH ST.									a l	
Suite, Apt. 4, etc. Suite, Apt. 4, etc. Suite, Apt. 4, etc.	MIAMI FL		MIAMI FL		•							- j - j	
Suite, Apt. 4, etc. Suite, Apt. 4, etc. Suite, Apt. 4, etc.	2. Principal I	Place of Business	3. Mailing Address						,	Ĺ	:	# .	
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See or fine or	City & Sta	te	City & State			4. FEI Number	262	.U)	• • • • • • • • • • • • • • • • • • • •	7	İ		
6. Name and Address of Currant Registered Agent Name ROY:*DANID R ESQ Street Address (P.O. Box Number is Not Acceptable)	Zip	Country	Zip	Country		5. Certificate of Status Des	<u> </u>	\$8.75 A	iditional	1		-	
ROY:DAVID R ESQ DAVID R ROY PA 4209 N FEDERAL MYY. POMPANO BEACH FI. 33064		6. Name and Address of Current	Registered Agent	+ +		7. Name and Address of N	lew Register		ed	-			
DAND R. ROY PA 4209 N. FEDERAL HWY. POMPAND BEACH FI. 33064		··· <u>-</u>			Name					1			
DAVID IR ROY PA 200 N. FEDERAL HWY. POMPANO BEACH FL 33064 The above named entity audints this statement for the purpose of changing its registered optice or registered agent, or both, in the State of Rorda. I am familiar with, and accept the obligations of registered agent, or both, in the State of Rorda. I am familiar with, and accept the obligations of registered agent, or both, in the State of Rorda. I am familiar with, and accept the obligations of registered agent, or both, in the State of Rorda. I am familiar with, and accept the obligations of registered agent, or both, in the State of Rorda. I am familiar with, and accept the obligations of registered agent, or both, in the State of Rorda. I am familiar with, and accept the obligations of Rorda. I am familiar with, and accept the obligations of Rorda. I am familiar with, and accept the obligations of Rorda. I am familiar with, and accept the obligations of Rorda. I am familiar with, and accept the obligations of Rorda. I am familiar with, and accept the obligations of Rorda. I am familiar with, and accept the obligations of Rorda. I am familiar with, and accept the obligations of Rorda. I am familiar with, and accept the obligations of Rorda. I am familiar with, and accept the obligations of Rorda. I am familiar with, and accept the obligations of Rorda. I am familiar with, and accept the obligations of Rorda. I am familiar with, and accept the obligations of Rorda. I am familiar with, and accept the Accept the Rorda. I am familiar with a state of Rorda. I am familiar with a st				9	Street Address (I	O. Box Number is Not Acce	ptable)			-		d i	
POWANO BEACH FL 33064 — City — FEL Zip Code The above named entity submits this statement to the purpose of changing its registered diffice or registered agent, or both, in the State of Rorda. Lam familiar with, and accept the obligations of registered agent. This corporation is eligible to setially its indiangible power of the company of the comp			- · · · · · · · · · · · · · · · · · · ·	· •			· · · · · · · · · · · · · · · · · · ·			4	٠.		
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. Common										•			
IGNATURE Control of the placehold agent. Control of the placehold agent and the supplied and the supplied agent and supplied agent and the supplied agent age	PUMPAN	U.BEACH FL 33064		C	Dity		F	- Zip Coo	!a]	-	-	-
Control of the placetor agent Control of the placetor agen	. The above	named entity submits this statement to	the purpose of changing it	ts registered o	office or registere	ed agent, or both, in the State	of Florida. I	am familiar with,	and accept	1	ľ	11 1	
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This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. After September 13, 2002 Fee will be \$750,00 After Septembe	IGNATURE .	*	***				٠						
Tax fing requirement and elects to do so. After September 13, 2002 Fee will be 3750.00 May Be Article September 13, 2002 Fee will be 3750.00 May Be Article September 14, 2002 Fee will be 3750.00 May Be Article September 14, 2002 Fee will be 3750.00 May Be Article September 15, 2002 Fee will be 3750.00 May Be Article September 14, 2002 Fee will be 3750.00 May Be Article September 14, 2002 Fee will be 3750.00 May Be Article September 15, 2002 Fee will be 3750			nd trie il applicable. (NO	TE: Registered Age	ent signature required v	when reinstating)	DA.	E		1			
Meke Check Payable to Department of State Trust Fund Contribution. Added to Fees						10. Election Campaig	in Financing	- \$5.0	In May Ba		j	ij.	
THE PASSET OFFICERS AND DIRECTORS IN 11 BE PASSOFEWALA, IDRIS Delete MASS SHEPT ADDRESS SHEPT ADDRE							bution.	☐ Adde	d to Fees	1			
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Changed, or on an attachment with an address, with all other like empowered. GNATURE: SIGNATURE: 8-20-03										ĺ		11:	
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