

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 13, 2002 8:00 am
Secretary of State

05-13-2002 90093 044 ***150.00

DOCUMENT # PO100006475P
1. Entity Name
Subway 2402P, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
19420 NW 3rd Court
Suite, Apt., #, etc.

3. Mailing Address
Suite, Apt., #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Pembroke Pines, FL
Zip
33029 Country
USA

City & State
City & State
Zip
Country

4. FEI Number Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
Idris Myerson
Street Address (P.O. Box Number is Not Acceptable)
19420 NW 3rd Court
City
Pembroke Pines **FL** Zip Code
33029

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.

SIGNATURE John Nysm
Signature, typed or printed name of registered agent and title if applicable

4/23/02
DATE

(NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. \$5:00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>President</u> <u>Idris Myerson</u> <u>19420 NW 3rd Court</u> <u>Pembroke Pines, FL 33029</u>
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IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify 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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: John Nysm
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/02
DATE

Daytime Phone #

IDRS Myerson

CR2E034B (12/01)