

2002 UNIFORM BUSINESS REPORT (UBR)**FILED**
Aug 11, 2002 8:00 am
Secretary of State

08-11-2002 90164 027 ***150.00

0047025 AV

DOCUMENT # P01000121496

1. Entity Name

DOLVAN CORPORATION-SUBWAY

Principal Place of Business

**180 CRANDON BLVD. STE 108
KEY BISCAINE FL 33149**

Mailing Address

**180 CRANDON BLVD. STE 108
KEY BISCAINE FL 33149**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

02-0610983

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**DELGADO, LUIS
6654 NW 175TH TERR
HIALEAH FL 33015**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐**FILE NOW!!! FEE IS \$550.00
After September 13, 2002 Fee will be \$750.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**PD
DELGADO, LUIS
6654 NW 175TH TERR
HIALEAH FL 33015**☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ DeleteTITLE
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CITY-ST-ZIP☐ Change ☐ AdditionTITLE
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CITY-ST-ZIP☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ Change ☐ Addition

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/02)

Attachment

P01000121496

AMERICAN ACCOUNTING, INC.

20810 West Dixie Highway
North Miami Beach, FL 33180
Phone (305) 653-7350
Fax (305) 653-5205

Fla. Dept. of State
Division of Corporation
P.O. Box 6327
Tallahassee, FL 32314

My client Dolvan Corporation-Subway document #P01000121496 never received the original 2002 Corporation Annual Report. Enclosed is a check for the annual fee of \$150.00, and a uniform business report for the year 2002.

Please Review and Advise

Very Truly Yours,


Stuart Socol