FILED Aug 29, 2003 8:00 am Secretary of State 08-29-2003 90092 042 ***150.00

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # POVO O	0 135108			
DOCUMENT # POVO OF 1. Entity Name Subway # VOS 1	o ipc.	(I) /		
DO NOT WRITE	IN THIS SP	ACE	·	
2. Principal Place of Business	3. Mailing Address			
105970 OUASEN GAM Suite, Apt. #, etc.	Suite, Apt. #, etc. Mt		DO NOT WRITE IN THIS SPACE	
City & State CALGO, Flaning	City & State		4. FEI Number 95 - 054 59/	Applied For Not Applicable
Zip 33037 Country	Zip	Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required
	Print property state of the second state of th	Name A	7. Name and Address of Current	4.0//
DO NOT WE		Street Address (<u> </u>	fluor
IN THIS SPA	AUE	City 1/6	Ormal Branch	7in Corle
8. The above named entity submits this statement for t	he purpose of changing its re	, / va. /	red agent, or both, in the State of Fl	orida.
SIGNATURE		Jung Jo	°co (_	8/12/07
9. This corporation is eligible to satisfy its Intangible	January 1 - May	Registered Agent signature required y.1. Fee is \$150.00		DATE
After May 1, Fee is \$550.00 10. Election Campaign Financing \$5:00 May Be Amended UBR is \$61.25 Trust Fund Contribution. Added to Fees Make Check Payable to Department of State				
11. OFFICERS AND DI	RECTORS	Francisco III.	opačio period e labo a celoja.	
NAME SALOOQ	DIXIE HAUT en FR33180	NAME STREET ADDRESS CITY ST ZIP		3348 (12/01
TITLE NAME STREET ADDRESS		TITLE NAME STREET ADDRESS		CRZE034B
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NAME STREET ADDRESS CITY-ST-ZIP	,	STREET ADDRESS	DO NOT	WRITE
TITLE RAME		CITY-ST-ZPP-	IN THIS	
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TITLE NAME		TITLE NAME		
STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP		
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: SIGNATURE AND TYPED OF PRINTED NAMED STORING OFFICER OF DIRECTOR Day From Phone #				

FAROO O

Affachment 80142009

A.R.S. & ASSOCIATES INC.

Stuart Socol Andrew Socol, C.P.A. Robert Socol, M.S.T. 20810 West Dixie Highway North Miami Beach, FL 33180 Telephone: (305)-653-7350 Fax: (305) 653-5205

August 19, 2003

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

Re: Subway 20510 Inc.

My client Subway 20510 Inc. documen # P02000135108 did not receive the original 2003 Uniform Business Report. Enclosed is a check for the annual fee of \$150.00 and a handwritten report for the year 2003.

The correct address for all forms to be mailed is 20810 West Dixie Highway, North Miami Beach, Florida 33180.

Please Review and Advise

Very Truly Yours