

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000108216

Entity Name: STEFF'S SUBS, INC

FILED
Jul 10, 2007
Secretary of State

Current Principal Place of Business:

5934 RED BUG LAKE RD
WINTER SPRINGS, FL 32708

New Principal Place of Business:

Current Mailing Address:

5934 RED BUG LAKE RD
WINTER SPRINGS, FL 32708

New Mailing Address:

5934 RED BUG LAKE ROAD
WINTER SPRINGS, FL 32708

FEI Number: 33-1100502

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REEVE, STEFFAN
1640 OVIEDO GROVE, APT 9
OVIEDO, FL 32765 US

Name and Address of New Registered Agent:

REEVE, STEFFAN
446B MOFFAT LOOP
OVIEDO, FL 32765 US

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:

07/10/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: REEVE, STEFFAN
Address: 1640 OVIEDO GROVE, APT 9
City-St-Zip: OVIEDO, FL 32765

Title: ST () Delete
Name: REEVE, MELANIE
Address: 1640 OVIEDO GROVE, APT 9
City-St-Zip: OVIEDO, FL 32765

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: REEVE, STEFFAN
Address: 446 MOFFAT LOOP
City-St-Zip: OVIEDO, FL 32765

Title: ST (X) Change () Addition
Name: REEVE, MELANIE
Address: 446 MOFFAT LOOP
City-St-Zip: OVIEDO, FL 32765

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MELANIE REEVE

MRS

07/10/2007

Electronic Signature of Signing Officer or Director

Date