

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000124423

Entity Name: SUBWAY 1307, INC.

FILED  
Feb 07, 2005  
Secretary of State

**Current Principal Place of Business:**

2626 E. TAMIAMI TRAIL  
NAPLES, FL 34112

**New Principal Place of Business:**

**Current Mailing Address:**

10560 SW 139 STREET  
MIAMI, FL 33176

**New Mailing Address:**

FEI Number: 20-1564839

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MYSOREWALA, ANWER  
2626 E. TAMIAMI TRAIL  
NAPLES, FL 34112 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: UMAR, HUMMAIR  
Address: 10560 SW 139 STREET  
City-St-Zip: MIAMI, FL 33176

Title: VP ( ) Delete  
Name: MYSOREWALA, ANWER  
Address: 10560 SW 139 STREET  
City-St-Zip: MIAMI, FL 33176

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ANWER MYSOREWALA

VP

02/07/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date