

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000151601

FILED
Feb 23, 2005
Secretary of State

Entity Name: SUBWAY TWO, INC.

Current Principal Place of Business:

1000 SW 191 AVENUE
PEMBROKE PINES, FL 33029 US

New Principal Place of Business:

Current Mailing Address:

1000 SW 191 AVENUE
PEMBROKE PINES, FL 33029 US

New Mailing Address:

FEI Number: 20-1837381 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ISMAIL, MOHAMMAD R
1000 SW 191 AVENUE
PEMBROKE PINES, FL 33029 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: ISMAIL, MOHAMMAD R
Address: 1000 SW 191 AVENUE
City-St-Zip: PEMBROKE PINES, FL 33029 US

Title: VP () Delete
Name: ISMAIL, HAROON
Address: 1000 SW 191 AVENUE
City-St-Zip: PEMBROKE PINES, FL 33029 US

Title: SEC () Delete
Name: ISMAIL, AMIN
Address: 1000 SW 191 AVENUE
City-St-Zip: PEMBROKE PINES, FL 33029 US

Title: TREA () Delete
Name: ISMAIL, MAHMOOD
Address: 1000 SW 191 AVENUE
City-St-Zip: PEMBROKE PINES, FL 33029 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: MOHAMMED ISMAIL

P

02/23/2005

Electronic Signature of Signing Officer or Director

_____ Date