## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000113233

Entity Name: SUBWAY 18162 INC

MAJID, AFZAL

11285 NW 49TH STREET

CORAL SPRINGS, FL 33076 US

Name:

Address: City-St-Zip: FILED Apr 20, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 6161 MIRAMAR PKWY STE 200 MIRAMAR, FL 33023 US **Current Mailing Address: New Mailing Address:** 6161 MIRAMAR PKWY STE 200 MIRAMAR, FL 33023 US FEI Number: 20-5476349 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ARS & ASSOCIATES INC 20810 WEST DIXIE HIGHWAY NORTH MIAMI BEACH, FL 33180 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition NAVIWALA, QADIR A Name: Name: 5849 EAGLE CAY CIRCLE Address: Address: City-St-Zip: COCONUT CREEK, FL 33076 US City-St-Zip: Title: VΡ Title: () Delete () Change () Addition Name: KARIM, MOHAMMED H Name: 138 NW 11TH COURT Address: Address: PEMBROKE PINES, FL 33028 US City-St-Zip: City-St-Zip: Title: Title: S/T ( ) Delete () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: QADIR NAVIWALA P 04/20/2009