## 2007 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

## May 01, 2007 8:00 am Secretary of State DOCUMENT # P06000151426 1. Entity Name 05-01-2007 90021 001 \*\*\*150.00 GOLDEN SUBWAY CORP. Principal Place of Business Mailing Address 10750 SOUTHWEST 128TH AVE. 10750 SOUTHWEST 128TH AVE. **MIAMI FL 33186 MIAMI FL 33186** 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State City & State 4. FEI Number Applied For 22-39491 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SOHR SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. Street Address (P.O. Box Number is Not Acceptable) 4TH FLOOR **MIAMI FL 33145** 3786 8. 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. I am familiar with, and accept the obligations of registered agent. yped or printed name of registered agent and title is applicable FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. THILE ☐ Delete DITLE ☐ Change ☐ Addition SOHR, SYLVIA P NAME NAME 10750-SOUTHWEST 128TH AVE. STREET ADDRESS STREET ADDRESS **MIAMI FL 33186** CITY-ST-ZIP CHY-ST-ZIP TITLE □ Delete HITLE ☐ Addition MARTINEZ-SOHR, IVAN NAME NAM 10750 SOUTHWEST 128TH AVE. STREET ADDRESS STREET ADDRESS MIAMI FL 33186 CITY-SI-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition MARTINEZ-SOHR, MANUEL NAME STREET ADDRESS 10750 SOUTHWEST 128TH AVE. STREET ADDRESS CITY-ST ZIP MIAMI.FL 33186 0(1Y-S1-7)P TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-SI-7IP HILE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Section 119, 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 tegal 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**FILED** 

1/18/07 305-386-0508