FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000023482 (1)

SUBWAY USA 2, INC.

FILED	
May 05 1997 8:00am	1
Secretary of State	



Principal Place 1104 BEVILLE I STE. F DAYTONA BCH US	RD.	STE. F	140 BLACK DUCK CIRCLE STE. F DAYTONA BCH. FL 32119-1314		3. Date Incorporated or Qualified		
2. Principal P	lace of Business	2a. Mailing Address	_	4. FEI Number	Ap	oplied For	
21			. PENINSULA	At 65-0417052		ot Applicable	
Suite, Apt 22		Suite, Apt #, etc.		5. Certificate of Status Desired		Additional equired	
City & Stat [23]	()	1201011	Beach Fl	6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added	May Be to Fees	
Z _I р	Country	Zip 11 0		Q 8. This corporation has liability for		. 199.032,	
24	25	29 3A 1 0	30 10-1-0-1-	Florida Statutes 10. Name and Address of New I	Yes No		
	9. Name and Address of Cu	rrent registereo Agent	81 Name	_ //			
140	llis, roseann Black Duck Cir. Tona BCH. Fl 32119		82 Street Ad	GEAMS KOSC Gress (P.O. Box Number is Not Accept 7 S. Pen/msc/A		Code	
office or r	egistored agent, or both, in the S in fairs liar with, and accept the o	tate of Florida. Such change wa bligations of, Section 607.0505,	itutes, the above-named co as authorized by the corpor	rporation submits this statement for the ation's board of directors. I hereby acc	DATE	registered	
100	PSTD	DELETE	11 TITLE	7,000,000,000,000,000	Change	Addition	
NAME	GEALLIS, MARK		1.2 NAME				
STREET ADDRESS	140 BLACK DUCK CIR.		1.3 STREET ADDRESS	1917 S. PENINSULA	pr.		
CHY-\$1-7#	DAYTONA BCH. FL		1.4 CITY-ST-ZIP	DAYTOWN ISCACH PI	. 32//8		
TITLE		☐ DELETE	2.1 TITLE	V.P. + D	☐ Change	Addition	
NAME			22 NAME	ROSEANN GEALLIS 1917 S. PENINSULA PA	≥ •		
STREET ACCORESIS				DAYTONA BEACH Fl.	2011&		
C:1Y+51_7/P 1011E		DELETE	2.4 CITY-ST-ZIP 3.1 TITLE	payrous serves to	Change	Addition	
NAME		vaca	3.2 NAME		— onongo	Pared Fraggisters	
STREET AUDRESS			3 3 STREET ADDRESS				
CITY ST ZIP			3.4 CITY-ST-ZIP				
TIFLE		DELETE	4.1 TITLE		☐ Change	Addition	
NAM			4.2 NAME				
STREET ADOLESS			4.3 STREET ADDRESS				
C 1Y S1-7IF			4.4 CITY-ST-ZIP				
11 1.18		☐ DELETE	5.1 TITLE		Change	Addition	
NAMI			5.2 NAME				
STREET ADORESS			5.3 STREET ADDRESS				
CHY ST AC		DELETE	5.4 CITY-ST-ZIP		Change	Addition	
Tillf		L.1 DECESE	61 TITLE		L Unange	L□ ¥00ilion	
NAME			6.2 NAME				
STREET ACCURESS			6.3 STREET ADDRESS				
CHTY - ST - ZIP	1		6.4 CITY-ST-2IP	ad in Contine 110 OT/OVA Flerido Press	The Committee of the Co		

I do nereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. Hurther certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or 904-252-1756

SIGNATURE:

SIGNATURE AND TYPEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR