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 # P93000058524 (8)

TRI-CITY SUBWAY, INC.

FILED
Apr 18 1997 8:00am
Secretary of State

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Principal Place of Business Mailing Address 9700 KOGER BLVD N 9700 KOGER BLVD N 307 307 ST PETERSBURG FL 33702 ST PETERSBURG FL 33702 US US			702-2437		3. Date Incorporated or Qualified 3a. Date of Last Report			
		••	03			05/01/19		
	Place of Business	2a. Mailing Address		attata	08/20/1993 4. FEI Number	1 2010 1/11	Applied Fo	or
21	A				59-3231846	Not Applicable		
Suite, Apt 22		Suite, Apt. #, etc.		· · · · · · · · · · · · · · · · · · ·	5. Certificate of Status Desired		1.75 Addition	ıal
Orty & Sta		City & State			6. Election Campaign Financing Trust Fund Contribution		5.00 May Be added to Fees	
Z(p)	Country	⊢ ¬ '	Z _{IP} Country		8. This corporation has liability for intangible tax under s. 199.032,			32,
24	25] 9. Name and Address of Cur	29 29 Acont	30			Yes No		
DD/		iailt uafistatan whalit	<u>-</u>	81 Name	10. Name and Address of New Re	gistered Ageni	,	
	IS, MICHAEL E ESQ.		Ĺ					
114 S PINELLAS AVE TARPON SPRINGS FL 34689			L	Street Add	Iress (P.O. Box Number is Not Acceptab	le)		
			[93				
			Ţ	B4 City		FL 85	Zip Code	
11. Pursuani	t to the provisions of Sections 607.6	9502 and 607 1508 Florida Stat	utes the ab	ove-named cor	noration submits this statement for the n		ning its sociat	lacad
SIGNATURE.	Sty. atto. Typod to printed name of registered	agent and title Lapp icable. (No	OTE Registered		poration submits this statement for the p tion's board of directors. I hereby accep ired when reinstating)	DATE		
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE			
DILE	PD PD 10041914	☐ DELETE	11 THI				hange [] Ad	dition
NAME	KHADER, IBRAHIM 9700 KOGER BLVD N SUITE	207	1.2 NA	1				
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011Y-S1-74P	STD	DELETE	1.4 CIT1 2.1 TITL	(-ST-ZIP		116	hoons 1 Ad	ddina
NAME	BSEISU, AMJAD	Stitle	2.2 NAM	-		<u></u> г	hange L.J Ad	IOHOH
STREET ADDRESS		307	1					
CHY-ST-7:P	ST PETERSBURG FL	. 007		EET ADDRESS				
TIF	AT	DELETE	3 1 TITL	Y-ST-ZIP E			hange Ad	dition
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NAME			4. 2 NAI	ME		***		
STREET ADORESS			4.3 STR	EET ADDRESS				
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NAME			5.2 NAN	(
STREET ADDRESS			5.3 STR	EET ADDRESS				
Cifn - ST- ZIP			5.4 CITY	r-ST-ZIP				
1171.8	William Co. Co.	DELETE	61 TITE			□ CI	hange 🔲 Add	ldition
NAMÉ			6.2 NAN	1E				
STREET ACCORESS				EET ADDRESS				
City - ST - ZIP		· ·		-ST-ZIP				
		AND AND AND AND ADDRESS OF THE ADDRE						

14. For hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 orector 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 12 or Block 13 if changed, or on an attachment with an address.

HIM KHADER 4/-11-97 813 578 16/2 SIGNATURE: