

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

FILED

Apr 29 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P93000058524 (8)

1. Corporation Name

TRI-CITY SUBWAY, INC.




Principal Place of Business 9700 KOGER BLVD N 307 ST PETERSBURG FL 33702 US	Mailing Address 9700 KOGER BLVD N 307 ST PETERSBURG FL 33702 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 3118 GULF TO BAY BLVD Suite, Apt. #, etc. 22 324 City & State 23 CLEARWATER FL Zip 24 33759		2a. Mailing Address 26 3118 GULF TO BAY BLVD Suite, Apt. #, etc. 27 324 City & State 28 CLEARWATER FL Zip 29 33759		3. Date Incorporated or Qualified 08/20/1993	
				4. FEI Number 59-3231846	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent DRIS, MICHAEL E ESQ. 114 S PINELLAS AVE TARPON SPRINGS FL 34689				10. Name and Address of New Registered Agent 81 Name IBRAHIM KHADER 82 Street Address (P.O. Box Number is Not Acceptable) 3118 GULF TO BAY BLVD #324 83 84 City CLEARWATER FL 85 Zip Code 33759	
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE:  DATE: 4/22/98

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PD	<input type="checkbox"/> DELETE		1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	KHADER, IBRAHIM			1.2 NAME			
STREET ADDRESS	9700 KOGER BLVD N SUITE 307			1.3 STREET ADDRESS	3118 GULF TO BAY BLVD #324		
CITY-ST-ZIP	ST PETERSBURG FL			1.4 CITY-ST-ZIP	CLEARWATER FL 33759		
TITLE	STD	<input type="checkbox"/> DELETE		2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	BSEISU, AMJAD			2.2 NAME			
STREET ADDRESS	9700 KOGER BLVD N SUITE 307			2.3 STREET ADDRESS	3118 GULF TO BAY BLVD #324		
CITY-ST-ZIP	ST PETERSBURG FL			2.4 CITY-ST-ZIP	CLEARWATER FL 33759		
TITLE	AT	<input type="checkbox"/> DELETE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	MAJALAWI, MAMOON			3.2 NAME			
STREET ADDRESS	9700 KOGER BLVD N SUITE 307			3.3 STREET ADDRESS	3118 GULF TO BAY BLVD #324		
CITY-ST-ZIP	ST PETERSBURG FL			3.4 CITY-ST-ZIP	CLEARWATER FL 33759		
TITLE		<input type="checkbox"/> DELETE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				4.2 NAME			
STREET ADDRESS				4.3 STREET ADDRESS			
CITY-ST-ZIP				4.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				6.4 CITY-ST-ZIP			

14. I 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 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 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE:  DATE: 4/22/98 813-724-8292

CR2E034 (10/97)