

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
SIXTH FLOOR
TALLAHASSEE, FLORIDA 32399-0001

APPROVED
AND
FILED

09/20/1993

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000066899 (4)**

SUBS INC

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 09/20/1993	3a. Date of Last Report 05/01/1994
4. FET Number 65-0424905	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
7. This corporation has adopted the provisions of the Florida Statutes ☒ Yes ☐ No	

2. Principal Office Address 4480-C S CLEVELAND AVE FT. MYERS FL 33912 US	2a. Mailing Address 12760 CHARTWELL DR FT. MYERS FL 33912
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country

9. Name and Address of Current Registered Agent

**PRABHU, VITTALDAS
12760 CHARTWELL DR.
FT. MYERS FL 33912**

10. Name and Address of New Registered Agent

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City
85. Zip Code **FL**

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

Signature of Registered Agent (Required when Agent is a Natural Person)

Signature of Registered Agent (Required when Agent is a Corporation)

6/1

12. OFFICERS AND DIRECTORS

1. TITLE P	1. NAME PRABHU, VITTALDAS
2. STREET ADDRESS 12760 CHARTWELL DR.	2. STREET ADDRESS 12760 CHARTWELL DR.
3. CITY, ST. ZIP FT. MYERS FL 33912	3. CITY, ST. ZIP FT. MYERS FL 33912
4. TITLE V	4. NAME PRABHU, NIRMALA V
5. STREET ADDRESS 12760 CHARTWELL DR.	5. STREET ADDRESS 12760 CHARTWELL DR.
6. CITY, ST. ZIP FT. MYERS FL 33912	6. CITY, ST. ZIP FT. MYERS FL 33912
7. TITLE	7. NAME
8. STREET ADDRESS	8. STREET ADDRESS
9. CITY, ST. ZIP	9. CITY, ST. ZIP
10. TITLE	10. NAME
11. STREET ADDRESS	11. STREET ADDRESS
12. CITY, ST. ZIP	12. CITY, ST. ZIP
13. TITLE	13. NAME
14. STREET ADDRESS	14. STREET ADDRESS
15. CITY, ST. ZIP	15. CITY, ST. ZIP
16. TITLE	16. NAME
17. STREET ADDRESS	17. STREET ADDRESS
18. CITY, ST. ZIP	18. CITY, ST. ZIP

13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	☐ Change ☐ Addition
1. NAME	
1. STREET ADDRESS	
1. CITY, ST. ZIP	
2. TITLE	☐ Change ☐ Addition
2. NAME	
2. STREET ADDRESS	
2. CITY, ST. ZIP	
3. TITLE	☐ Change ☐ Addition
3. NAME	
3. STREET ADDRESS	
3. CITY, ST. ZIP	
4. TITLE	☐ Change ☐ Addition
4. NAME	
4. STREET ADDRESS	
4. CITY, ST. ZIP	
5. TITLE	☐ Change ☐ Addition
5. NAME	
5. STREET ADDRESS	
5. CITY, ST. ZIP	
6. TITLE	☐ Change ☐ Addition
6. NAME	
6. STREET ADDRESS	
6. CITY, ST. ZIP	

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 13.01(2) of the Florida Statutes. I further certify that the information included 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 1, or Block 1a if changed, or on an attachment with an address.

SIGNATURE:

VITTALDAS PRABHU
VITTALDAS PRABHU
PRES

5/4/95 (813)
278-1012