

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

FILED  
May 15 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P93000068178 (1)

1. Corporation Name

FLORIDA BLIMPIE LEASING CORP.

Principal Place of Business

Mailing Address

801 NE 167TH ST.  
SUITE 300  
NORTH MIAMI BEACH FL 33162  
US

P.O. BOX 888287  
DUNWOODY GA 30356-0287  
US



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/30/1993

4. FEI Number

58-6287115

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

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.



Yes



No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

1775 The Exchange  
# 600  
Atlanta, Georgia  
30339 USA

9. Name and Address of Current Registered Agent

UNITED CORPORATIVE SERVICES INC.  
801 NE 167TH ST.  
SUITE 300  
NORTH MIAMI BEACH FL 33162

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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: typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	DP	<input type="checkbox"/> DELETE
NAME	SIEGEL, DAVID L	
STREET ADDRESS	740 BROADWAY	
CITY-ST-ZIP	NEW YORK NY	
TITLE	DS	<input type="checkbox"/> DELETE
NAME	LEANESS, CHARLES G	
STREET ADDRESS	740 BROADWAY	
CITY-ST-ZIP	NEW YORK NY	
TITLE	TV	<input checked="" type="checkbox"/> DELETE
NAME	SITKOFF, ROBERT	
STREET ADDRESS	1775 THE EXCHANGE	
CITY-ST-ZIP	ATLANTA GA	
TITLE	V	<input type="checkbox"/> DELETE
NAME	POMPEO, PATRICK	
STREET ADDRESS	740 BROADWAY	
CITY-ST-ZIP	NEW YORK N6	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	V/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	DAVID L. SIEGEL	
1.3 STREET ADDRESS	740 BROADWAY - 12th FLOOR	
1.4 CITY-ST-ZIP	NEW YORK, NY 10003	
2.1 TITLE	V/D/S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	CHARLES G. LEANESS	
2.3 STREET ADDRESS	740 BROADWAY - 12th FLOOR	
2.4 CITY-ST-ZIP	NEW YORK, NY 10003	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	PATRICK POMPEO	
4.3 STREET ADDRESS	740 BROADWAY - 12th FLOOR	
4.4 CITY-ST-ZIP	NEW YORK, NY 10003	
5.1 TITLE	P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	JOSEPH MORGAN	
5.3 STREET ADDRESS	740 BROADWAY - 12th FLOOR	
5.4 CITY-ST-ZIP	NEW YORK, NY 10003	
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
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 in an attachment with a address.

SIGNATURE

DAVID L. SIEGEL 5/12/98 1212173-FA00

CR2E034 (10/97)