

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000068178

1. Corporation Name

FLORIDA BLIMPIE LEASING CORP.

Principal Place of Business

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

Mailing Address

1775 THE EXCHANGE
600
ATLANTA GA 30339
US

APPROVED
AND
FILED

99 JAN 11 PM 4:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



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 the current year Intangible
Personal Property Tax.



Yes



No

9. Name and Address of Current Registered Agent

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

81 Name

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

83

84 City

FL

85

Zip Code

10. Name and Address of New Registered Agent

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 ☐ DELETE

NAME VD
STREET ADDRESS SIEGEL, DAVID L
CITY-ST-ZIP 740 BROADWAY 12TH FL
NEW YORK NY 10003

TITLE ☐ DELETE

NAME VDS
STREET ADDRESS LEANESS, CHARLES G
CITY-ST-ZIP 740 BROADWAY 12TH FL
NEW YORK NY 10003

TITLE ☐ DELETE

NAME P
STREET ADDRESS MORGAN, JOSEPH
CITY-ST-ZIP 740 BROADWAY 12TH FL
NEW YORK NY 10003

TITLE ☐ DELETE

NAME T
STREET ADDRESS POMPEO, PATRICK
CITY-ST-ZIP 740 BROADWAY 12TH FL
NEW YORK NY 10003

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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01/14/99 01113 015

*****158.75 *****158.75

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 an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(LEANESS)

1/5/99

Date

(212) 673-5900

Daytime Phone #

0013

CR2E034 (11/98)