

APPLICATION
FOR
REINSTATEMENT
FOR

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE.

FILED

93 JUN -2 PM 12:56

Read Instructions on Other Side Before Making Entries

Make Check Payable To: Department of State

1. Name and Mailing Address of Corporation: DOCUMENT # P930000 84851
SUBWAY 5142, INC.
18405 N.W. 27TH AVENUE
MIAMI, FL 33056

2. If Address in Block 1 is incorrect in any way, enter the correct address below. The NAME of the corporation can be changed only by filing an amendment.

Address

13172 N.W. 18TH STREET

Address

City and State

PEMBROKE PINES, FLORIDA

Zip Code

33028

3. Date Incorporated or Qualified
To Do Business in Florida

12/13/93

4. FEI Number

65-0453510

☐ FEI Number Applied For
☐ FEI Number Not Applicable

5. Names and Street Addresses of Each Officer and/or Director

1 Title	2 Names of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City and State
P	HARRY NORTON	13172 N.W. 18th Street	Pembroke Pines, FL
			600002548926--S -06/05/98--01068--009 *****900.00 *****900.00
			REINSTATEMENT <u>97-98</u>
			SL 6-2-98

This corporation has liability for intangible tax under section 199.032, Florida Statutes. ☐ Yes ☐ No
For intangible tax information call Department of Revenue 904-488-6800.

REGISTERED AGENT INFORMATION

6. Name and Address of Current Registered Agent

HARRY NORTON
18405 N.W. 27TH AVENUE
MIAMI, FL 33056

7. Name and Address of New Registered Agent

Name

HARRY NORTON

Street Address (Do NOT Use P.O. Box Number)

13172 N.W. 18th Street

Street Address (Do NOT Use P.O. Box Number)

City and State

Pembroke Pines FL

Zip Code

33028

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505, F.S.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date 6/1/98

9. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., and that all fees owed by the corporation have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Signature of
Officer or Director

Date 6/1/98

Phone # (954) 433 7259

Typed or printed name of signing officer or director

HARRY NORTON

10. Should you desire a certificate of status check the box.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee
required for a
Certificate of Status.