

FLORIDA DEPARTMENT OF STATE

Katherine Harris

APPRUVEU AND FILED

ANN	NUAL REPORT Secretary of State  1999 DIVISION OF CORPORATIONS					99 JAN 11 PM 4: 43			
						SEPPETAGO			
DOCUMENT # P9400085076						SECRETARY OF STATE TALLAHASSEE, FLORIDA			
BLIMPIE AIRPARK FLORIDA LEASING CORP.							nuo <sub>A</sub>		
Principal Plac	e of Business	Mailing A	ddress				1 106/1007 310 19111 01837 00731 86111 00557 00787 16101 02711 00111 1807		
C/O 801 N.E. 167TH STREET 1775 THE EXCHANGE									
			SUITE 600 ATLANTA GA 30339				DO NOT WRITE IN THIS SPACE		
US							3. Date Incorporated or Qualifed		
							11/22/1994	• {	
2. Principal P	Place of Business	2a. Mailin	2a. Mailing Address				4. FEI Number Applied For		
21	· · · · · · · · · · · · · · · · · · ·	26	<del></del>			· ·	65-0542601 Not Ap	plicable	
Suite, Apt.	#, etc.	Suite, 27	Suite, Apt. #, etc.				5. Certificate of Status Desired 🔽 \$8.75 Addit Fee Requir		
City & State			City & State			====	6. Election Campaign Financing \$5.00 May	Be	
23							Trust Fund Contribution Added to Fe	es	
Zip				Country 30			8. This corporation owes the current year Intangible Personal Property Tax.	,_	
24	9. Name and Address of Curr	29 rent Registered A		301			Personal Property Tax. Yes IN  10. Name and Address of New Registered Agent	-	
					81 N	lame	10: 110:10 0:10 0:10 1:10 1:00 0:10 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1		
UNITED CORPORATE SERVICES, INC.						St 4 & 1	4-T-000		
801 N.E. 167TH STREET					82 Street Address (P.O. Box Number is Not Acceptable)				
SUITE 300					83				
NOR	ITH MIAMI BEACH FL 33162			ļ.	B4 C	ity	85 Zip Code		
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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					<u></u>		<del></del>		
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Re					gistered Agent signature required		<del></del>		
12.	OFFICERS AND DIRECTORS  VD			_	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS I	N 12 S	
NAME	SIEGEL, DAVID L.		C Settine	1.1 TITLE		- 1	<del></del> •	-   -	
STREET ADDRESS	740 BROADWAY		1.2 NAME 1.3 STREET ADDRESS		DRESS	9000027425195	_ <b>:</b> =		
CITY-ST-ZIP	NEW YORK NY 10003		1.4 CITY-ST-ZIP		- 1	-01/14/9901113005 ****158 75 ****158	}		
TITLE	P DELETE		2.1 TITLE				Addition		
NAME	MORGAN, JOE		2.2 NAME		İ				
STREET ADDRESS	The Broad Post and		2.3 STREET ADDRESS		DRESS				
CITY-ST-ZIP	NEW YORK NY 10003			2.4 City-ST-ZiP		P			
TITLE	VTD DELETE			3.1 TITLE			Change	Addition	
NAME	Leaness, Charles			3.2 NAME		!			
STREET ADDRESS				3.3 STREET ADDRESS		DRESS			
CITY-ST-ZIP	NEW YORK NY 10003			3.4. CITY-ST-ZIP		Р			
TITLE	S DELETE			4.1 ΠΤLE			Change	] Addition	
NAME	PATRICK POMPEO 740 BROADWAY, 12TH FL			4. 2 NAME					
STREET ADDRESS	NEW YORK NY 10003			4.3 STREET ADORESS		1		j	
CITY-ST-ZIP	NEVY YORK NY 10003		4.4 CITY-ST-ZIP 5.1 TITLE		<del>-  -</del>	☐ Change	Addition		
NAME			_ ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	5.1 NAME			_ Statige _	1. Maison	
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CITY-ST-ZIP	ſ			•	5.4 CITY-ST-ZIP		W 1111	-	
TILE	<del></del>	<del></del>	☐ DELETE	6.1 TITLE			☐ Change	] Addition	
NAME				6.2 NAME	E	i	1	ĺ	

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 regeiver 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 patient must with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CfTY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP