

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 # P94000087523 (4)

1. Corporation Name

FOURTH NORTHWEST FLORIDA BLIMPIE REALTY, INC.



Principal Place of Business

801 N.E. 167TH STREET  
SUITE 300  
NORTH MIAMI BEACH FL 33162

Mailing Address

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

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 1775 The Exchange

27 #600

28 Atlanta, Georgia

29 30339 30 USA

3. Date Incorporated or Qualified

12/02/1994

4. FEI Number

65-0542639

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

9. Name and Address of Current Registered Agent

UNITED CORPORATE SERVICES, INC.  
801 N.E. 167TH STREET  
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 P ☐ DELETE

NAME MORGAN, JOE  
STREET ADDRESS 740 BROADWAY  
CITY-ST-ZIP NEW YORK NY

TITLE VSD ☐ DELETE

NAME LEANESS, CHARLES  
STREET ADDRESS 740 BROADWAY  
CITY-ST-ZIP NEW YORK NY

TITLE VT ☒ DELETE

NAME SITKOFF, ROBERT  
STREET ADDRESS 1775 THE EXCHANGE SUITE 600  
CITY-ST-ZIP ATLANTA FL

TITLE D ☐ DELETE

NAME SIEGEL, DAVID L  
STREET ADDRESS 740 BROADWAY  
CITY-ST-ZIP NEW YORK NY

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

11 TITLE ☐ Change ☐ Addition

12 NAME  
13 STREET ADDRESS  
14 CITY-ST-ZIP

21 TITLE ☐ Change ☐ Addition

22 NAME  
23 STREET ADDRESS  
24 CITY-ST-ZIP

31 TITLE ☐ Change ☐ Addition

32 NAME  
33 STREET ADDRESS  
34 CITY-ST-ZIP

41 TITLE ☒ Change ☐ Addition

42 NAME V/D DAVID L. SIEGEL  
43 STREET ADDRESS 740 BROADWAY - 12th FLOOR  
44 CITY-ST-ZIP NEW YORK, NY 10003

51 TITLE ☐ Change ☒ Addition

52 NAME PATRICK POMPEO  
53 STREET ADDRESS 740 BROADWAY - 12th FLOOR  
54 CITY-ST-ZIP NEW YORK, NY 10003

61 TITLE ☐ Change ☐ Addition

62 NAME  
63 STREET ADDRESS  
64 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 an address.

DAVID L. SIEGEL, checked, 10/12/98, 5:00am

CR2E034 (10/97)