


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

FILED
Apr 14 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000028432 (9)
 1. Corporation Name
COUNTY LINE SUBWAY, INC.



Principal Place of Business 8563 SHERATON DRIVE MIRAMAR FL 33025	Mailing Address 8563 SHERATON DRIVE MIRAMAR FL 33025
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
04/11/1995

2. Principal Place of Business 21 21453 NW 2 AVE Suite, Apt. #, etc.	2a. Mailing Address 26 21453 NW 2 AVE Suite, Apt. #, etc.
22 City & State MIAMI, FL	27 City & State MIAMI, FL
23 Zip 33169 Country DADE	28 Zip 33169 Country DADE

4. FEI Number 65-0574013	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent
NICOLAS, KETLIE
8563 SHERATON DRIVE
MIRAMAR FL 33025

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	21453 NW 2 AVE
83	
84 City	MIAMI FL
85 Zip Code	33169

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]* DATE: **1/20/98**

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	NICOLAS, KETLIE	
STREET ADDRESS	8563 SHERATON DRIVE	
CITY-ST-ZIP	MIRAMAR FL 33025	
TITLE	RODNEY P. NICOLAS	<input type="checkbox"/> DELETE
NAME	RODNEY P. NICOLAS	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	GILBERT NICOLAS	<input type="checkbox"/> DELETE
NAME	GILBERT NICOLAS	
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	21453 NW 2 AVENUE
1.4 CITY-ST-ZIP	MIAMI FL 33169
2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	RODNEY NICOLAS
2.3 STREET ADDRESS	21453 NW 2 AVENUE
2.4 CITY-ST-ZIP	MIAMI, FL 33169
3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	GILBERT NICOLAS
3.3 STREET ADDRESS	21453 NW 2 AVENUE
3.4 CITY-ST-ZIP	MIAMI, FL 33169

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 on an attachment with an address.

SIGNATURE: *[Signature]* DATE: **1/20/98**

CR2E034 (10/97)