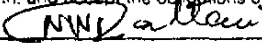


FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
Jun 04 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 1. Corporation Name P960000000669 SUBS USA, INC.					
Principal Place of Business 6833 Miramar Pkwy Miramar, FL 33134			Mailing Address 6833 Miramar Pkwy Miramar, FL 33134		
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 3a. Date of Last Report	
4. FEI Number 65-0638246		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 has liability for intangible tax under s. 199.032 Florida Statutes ☒ Yes ☐ No					
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent		
			81 Name Nizar Rattani		
			82 Street Address (P.O. Box Number is Not Acceptable) 5218 NW 185th Terrace		
			83		
			84 City Miami		
			FL		
			85 Zip Code 33055		
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			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
☐ DELETE			☐ Change ☒ Addition		
11 TITLE NAME STREET ADDRESS CITY-ST-ZIP			11 TITLE PS Nizar Rattani 5218 NW 185th Terrace Miami, FL 33055		
☐ DELETE			☐ Change ☒ Addition		
11 TITLE NAME STREET ADDRESS CITY-ST-ZIP			21 TITLE VP T Mehboob Lakhani 14701 Wesley Manor Davie, FL 33325		
☐ DELETE			☐ Change ☐ Addition		
11 TITLE NAME STREET ADDRESS CITY-ST-ZIP			31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP		
☐ DELETE			☐ Change ☐ Addition		
11 TITLE NAME STREET ADDRESS CITY-ST-ZIP			41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP		
☐ DELETE			☐ Change ☐ Addition		
11 TITLE NAME STREET ADDRESS CITY-ST-ZIP			51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP		
☐ DELETE			☐ Change ☐ Addition		
11 TITLE NAME STREET ADDRESS CITY-ST-ZIP			61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP		
			200002208852 -06/11/97-01075-007 ***550.00		
14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(a), 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. 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

CR-001 (1/96)