

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000063183

1. Entity Name

GATEWAY SUBWAY, INC.

FILED
Apr 27, 2000 8:00 am
Secretary of State

04-27-2000 90033 018 ***150.00

Principal Place of Business

Mailing Address

1930 E. SUNRISE BLVD
FT. LAUDERDALE FL 33304

1930 E. SUNRISE BLVD
FT. LAUDERDALE FL 33304-1477

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 65-0684067

Applied For

Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LEE, JAE
2042 DISCOVERY CIRCLE E.
DEERFIELD BEACH FL 33442

Name CHAL CHANG

Street Address (P.O. Box Number is Not Acceptable)

7400 SW 19 STREET

City PLANTATION

FL

Zip Code 33317

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and fee if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P
NAME LEE, JAE
STREET ADDRESS 2042 DISCOVERY CIRCLE E.
CITY-ST-ZIP DEERFIELD BEACH FL 33442

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CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)