

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

APPROVED
AND
FILED

1997 SEP 16 AM 9:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P96000095297 (3)**

1. Corporation Name
BLIMPIE AT PINES WEST, INC.



Principal Place of Business 17101 PINES BLVD. PEMBROKE PINES FL 33029 33027-1001	Mailing Address 17101 PINES BLVD. PEMBROKE PINES FL 33029-33027-1001
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 17101 PINES BLVD.		2a. Mailing Address 26 'SAME'		3. Date Incorporated or Qualified 11/21/1996	3a. Date of Last Report N/A
Suite, Apt. #, etc. 22		Suite, Apt. #, etc. 27		4. FEI Number 65-0709496	Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/>
City & State 23 PEMBROKE PINES		City & State 28		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip 24 33027	Country 25 USA	Zip 29	Country 30	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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**PANGIA, JOSEPH J
17101 PINES BLVD.
PEMBROKE PINES FL 33029 33027-1001**

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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PANGIA, JOSEPH J	1.2 NAME	
STREET ADDRESS	4830 S.W. 193RD LANE	1.3 STREET ADDRESS	
CITY-ST-ZIP	FORT LAUDERDALE FL 33332	1.4 CITY-ST-ZIP	
TITLE	VD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PANGIA, AILEEN L	2.2 NAME	
STREET ADDRESS	4830 S.W. 193RD LANE	2.3 STREET ADDRESS	
CITY-ST-ZIP	FORT LAUDERDALE FL 33332	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for 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.

CR2E034 (4/97)

Florida Department of State
Division of Corporations
Annual Reports Section
P.O.Box 1500
Tallahassee, Fl. 32302-1500

August 23, 1997

**Re: Blimpie At Pines West, Inc.
Document # P96000095297
1997 Annual Report.**

Dear Sir/Madam:

I am in receipt of your 2nd notice for filling the 1997 Annual Report. Please note that I have never received the first notice of the annual report. I know that this is not an excuse for not filing.

Please keep in mind that I incorporated my business by the end of 1996 and I was not aware that I have to file an annual report by the beginning of 1997 also. If I did, I would have contacted the department of state for filing and would have not subjected my business for late filing fees of \$385. Also please keep in mind that this is a new business hardly surviving and late filing fees of \$385. will create an economic hardship on this struggling business.

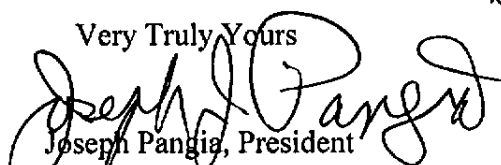
Therefore, I respectfully request your consideration of the situation by abating the late filing fees assessed.

Now, that I know the filing requirements for the annual report, in the future I will make sure that this report will be filed in a timely manner.

Please find enclosed a check for \$165 for filing fees.

Your favorable consideration is fully appreciated.

Very Truly Yours


Joseph Pangia, President
Blimpie at Pines West, Inc.