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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000044794 (0)

QUIZNO'S OF SOUTH TAMPA, INC.

FILED Apr 22 1998 8:00am Secretary of State



Principal Place of Business		Mailing Address				r andjabot ain shiri jheir detri bhiri hhiri heist hibis ninta inna inna hibis dibi shot
1155 SOUTH DALE MABRY HIGHWAY		1155 SOUTH DALE MABRY HIGHWAY				
TAMPA FL 33629		TAMPA FL 33629				DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
						05/16/1997
2. Principal Place of Business 2s. Mailing Address						4. FEI Number Applied For
21		26				59-3448800 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				SR 75 Additional
22		27				5. Certificate of Status Desired Fee Required
City & State		City & State			6. Election Campaign Financing \$5.00 May Be	
23		28			Trust Fund Contribution	
Zip	Zip Country 2		Zip Country			8. This corporation owes or has paid the current year Intangible
24	25	29	30			Personal Property Tax due June 30. X Yes No
	9. Name and Address of Current	Registered Agent	81			10. Name and Address of New Registered Agent
Rubenstein, Jeffrey				Ή.	Name	
1155 \$O UTH DALE MABRY HIGHWAY			82	82 Street Address (P.O. Box Number is Not Acceptable)		
TAN	MPA FL 33629			\perp		
£100			83	1		
	7		84	1	City	■■ 85 Zip Code
						FL
11. Pursuant	to the provisions of Sections 607 0502	and 607.1508, Florida S tatu	tos, the abov	e-r	named corpo	oration 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						
<u> </u>	Signature, typed or prioteo name of registered agen			onl t	signature require	ed when re-instating) DATE
12.	OFFICERS AND	· · · · · · · · · · · · · · · · · · ·	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PO	L DELETE	11 TITLE			☐ Change ☐ Addition
NAME RUBENSTEIN, JEFFREY			1.2 NAME			
STREET ADDRESS 1155 SOUTH DALE MABRY HIGHWAY, SUITE 3A			1.3 STREET ADDRESS			
CITY-ST-ZIP	TAMPA FL 33629	T OCULTE	1.4 CITY-	\$1 · Z	ZIP	
TITLE	VPD	∐ DELET e	2.1 TITLE			Change Addition
NAME	MULLER, GLENN		2.2 NAME			
STREET ADDRESS 11A HAYDEN AVENUE			2.3 STREE1 ADDRESS			
CITY-ST-ZIP GREAT NECK NY 10024		Drutte	2.4 CITY-ST-ZIP		ZIP	
TITLE	\$TD DELETE		3.1 TITLE			☐ Change ☐ Addition
NAME	(110222717102211012111) 111111		3.2 NAME			
7.00 00011. 01.00 11.011. 11.0111. 11.011.			3.3 STREE			
CITY-ST-ZIP			_	3.4 CITY-ST-ZIP		
TITLE		☐ DELETE				Change Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREE			
CITY-ST-ZIP			4.4 CITY - S	ST-2	ZIP	
TITLE		L DELETE	5.1 TITLE			☐ Change ☐ Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET	T AD	DAESS	
CITY-ST-ZIP			5.4 CHY-3	\$1- <i>Z</i>	ZIP	
TITLE		☐ DELETE	6 1 TITLE			Change Addition
NAME			62 NAME			
STREET ADDRESS			63 STREET	T ADI	DRESS	
CITY-ST-ZIP			6.4 CITY - S	ST-Z	ZIP	
14 I hereby o	ertify that the information supplied wit	this filing does not cualify f	or the evemn	atio	n stated in S	Section 119 07(3)(i) Florida Statutes, I further certify that the information

Interest 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 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 trusted 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 attachurent with an address.