

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 28, 2002 8:00 am
Secretary of State

05-28-2002 91658 001 ***317.50

DOCUMENT # **P980000028633** ✓

1. Entity Name
Subway Britannica II, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
Subway

3. Mailing Address
PO Box 607

Suite, Apt. #, etc.
Pine Forest Rd

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Pensacola FL

City & State
Milton FL

4. FEI Number
62-173474

Applied For
 Not Applicable

Zip
32503

Country
USA

Zip
32572

Country
USA

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

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
Jeffrey Leeds

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

3509 Edinburg Rd

City *Pace* **FL** Zip Code *32571*

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
*President
Jeffrey Leeds
3509 Edinburg Rd
Pace FL 32571*

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
*Secretary
Holly Leeds
3509 Edinburg Rd
Pace FL 32571*

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
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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 on an attachment with an address, with all other like empowered.

SIGNATURE: *Jeffrey Leeds* *4/28/02* *850 994-3715*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/01)