2005 FOR PROFIT CORPORATION ANNUAL REPORT

May 04, 2005 08:00 AN Secretary of State **DOCUMENT # P98000039774** 1. Entity Name CT'S SANDWICHES, INC. Principal Place of Business Mailing Address 902 W. BUSCH BLVD. 902 W. BUSCH BLVD. TAMPA, FL 33612 TAMPA, FL 33612 No Chg-P CR2E034 (10/03) 05022005 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3518402 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent STULL, JEFFREY DO NOT WRITE 602 SOUTH BLVD. **TAMPA, FL 33606** IN THIS SPACE 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title Y applicable DVOTE. Replatered Agent signature required when reinstating) DATE \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice, FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing Trust Fund Contribution. Due by September 7, 2005 10. OFFICERS AND DIRECTORS mle MOUSSEAU, JAMES J NAUK STREET ADDRESS 902 W BUSCH BLVD #101 U00000362280 CITY-ST-ZIP **TAMPA, FL 33612** 05/05/05-80108-018 TITLE STREET ADDRESS CITY-ST-ZIP ព្រះ NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CDY-53-7P IIILE NAME STREET ADDRESS CITY-SY-7IP 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(f). 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 10 or Block 11 if changed, or on an attacture or mith an address, with all other like empowered. SIGNATURE:

FILED

Devilor Phone #