2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2009
Secretary of State

DOCUMENT# P99000083892

Entity Name: 1216 SUBWAY, INC.

Current Principal Place of Business:

2359 UNIVERSITY DRIVE
CORAL SPRINGS, FL 33065

New Principal Place of Business:

Current Mailing Address:

2359 UNIVERSITY DRIVE
CORAL SPRINGS, FL 33065

New Mailing Address:

FEI Number: 65-0949242 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SOCOL, ANDREW
20810 WEST DXIE HIGHWAY
MIAMI, FL 33180 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DVPS ( ) Delete
Name: KARIM, MOHAMMED H
Address: 767 SOUTH STATE ROAD 7 SUITE 13
City-St-Zip: MARGATE, FL 33068

Title: DPT ( ) Delete
Name: MAJID, AFZAL
Address: 767 SOUTH STATE ROAD 7 SUITE 13
City-St-Zip: MARGATE, FL 33068

Title: DV ( ) Delete
Name: MAJID, SHAFI
Address: 767 SOUTH STATE ROAD 7 SUITE 13
City-St-Zip: MARGATE, FL 33068

Title: DV ( ) Delete
Name: FENTON, DAMION
Address: 767 SOUTH STATE ROAD 7 SUITE 13
City-St-Zip: MARGATE, FL 33068

Title: DV ( ) Delete
Name: FENTON, ANNETTE
Address: 767 SOUTH STATE ROAD 7 SUITE 13
City-St-Zip: MARGATE, FL 33068

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MOHAMMED KARIM P 04/20/2009

Electronic Signature of Signing Officer or Director Date