2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000083905

Entity Name: 17893 SUBWAY, INC.

Address:

City-St-Zip:

10649 WILES ROAD

CORAL SPRINGS, FL

FILED Feb 04, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 10649 WILES ROAD CORAL SPRINGS, FL **Current Mailing Address: New Mailing Address:** 10649 WILES ROAD CORAL SPRINGS, FL FEI Number: 65-0949180 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SOCOL, ANDREW 20810 WEST DIXIE HWY MIAMI, FL 33180 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition KARIM, MOHAMMED H KARIM, MOHAMMED H Name: Name: 767 SOUTH STATE ROAD 7 SUITE 13 20810 WEST DIXIE HIGHWAY Address: Address: City-St-Zip: MARGATE, FL 33068 City-St-Zip: MIAMI, FL 33180 Title: **DVPS** Title: () Delete (X) Change () Addition Name: MAJID. AFZAL Name: GOGIA. JAYANT 767 SOUTH STATE ROAD 7 SUITE 13 20810 WEST DIXIE HIGHWAY Address: Address: MARGATE, FL 33068 MIAMI, FL 33180 City-St-Zip: City-St-Zip: Title: Title: (X) Delete () Change () Addition MAJID, SHAFI Name: Name: 767 SOUTH STATE ROAD 7 SUITE 13 Address: Address: City-St-Zip: MARGATE, FL 33068 City-St-Zip: Title: (X) Delete Title: () Change () Addition NAVIWALA, OADIR A Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: JAYANT GOGIA P 02/04/2009