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

**PROFIT CORPORATION ANNUAL REPORT** 



ÉLORIDA DEPARTMENT DE STATÉ

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #
1. Corporation Name

S70462

(4)

B.M. SUBWAY, INC.

Mailing Address

Principal Place of Business 9700 KOGER BLVD N

ST PETERSBURG FL 33702

2. Principal Place of Business

9700 KOGER BLVD N

2a. Mailing Address

ST PETERSBURG FL 33702

## **FILED** Apr 28 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

4/22/28 813724-8292

Applied For

3. Date Incorporated or Qualified

08/02/1991

4. FEI Number

213186	CLETO BAY BWD	26 3118 GULF T	D BAY BLVN	65-0279373	Not Applicable
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.			\$8.75 Additional
22 329		27 324		5. Certificate of Status Desired	Fee Required
City & Stat		City & State	·0 •u	6. Election Campaign Financing	\$5.00 May Be
	RWATER FL Country	28 CLEARWATE	Country	Trust Fund Contribution	Added to Fees
24 <b>3</b> 37	59 25 USA	<sup>Ziρ</sup> 33759 3	50 USA	8. This corporation owes or has paid     Personal Property Tax due June 3	
4 200	9. Name and Address of Current F		10) O DI 1	10. Name and Address of New Regi	
DRIS, MICHAEL E., ESQ.  114 S PINELLAS AVE TARPON SPRINGS FL 34689  81 Name IBRAHIM KHADEK  Street Address (P.O. Box Number is Not Acceptable) 318 GULF TO BAY BLVD #324					
			84 City	ewayer_	FL 85 Zip Code 3 3 7 5 9
11. Pursuant to the provisions of Sections 607 0502 and 607,1508, Florida Statutes, the above-named corporation 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  Signature, typed of profed the profed of registered agent and this it applicable.  (NOTE: Registered Agent signature required when reinstating)					
12.	OFFICERS AND L		13.	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTORS IN 12
TITLE	PD	☐ DELETE	1.1 TITLE		Change Addition
NAME	KHADER, IBRAHIM		1.2 NAME		
STREET ADDRESS	9700 KOGER BLVD N SUITE 30	7	1.3 STREET ADDRESS 3	LEARWATER FL	BWD#324
CITY-ST-ZIP	ST PETERSBURG FL		1.4 CITY-ST-ZIP	LEARINATER FL	33759
TITLE	AT	☐ DELETE	21 TITLE		Change Addition
NAME	AL-QASEM, MOHAMMED		2.2 NAME		
STREET ADDRESS	9700 KOGER BLVD N SUITE 30	7	2.3 STREET ADDRESS		
CITY-ST-ZIP	ST PETERSBURG FL		2.4 CITY-ST-ZIP		
TITLE	STD	☐ DELETE	. 3.1 TITLE		Change Addition
NAME	Bseisu, amjad		3.2 NAME		
STREET ADDRESS	15625 PRESTON RD		3.3 STREET ADDRESS		
CITY-ST-ZIP	DALLAS TX		34. CITY-ST-ZIP		
TITLE		☐ DEL <b>ete</b>	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME (			52 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		☐ DELÉTE	6.1 TITLE		Change  Addition
NAME	7		6.2 NAME	•	
STREET ADDRESS	τ. π.:		6.3 STREET ADDRESS		
CITY-ST-ZIP	*		6.4 CITY - ST - ZIP		
14. Thereby 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 or supplemental 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 trustee 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 attachment with an address.					