

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # **\$70462**

1, Corporation Name B.M. SUBWAY, INC. 145 But 1884

Apr 09, 1999 8:00 am Secretary of State

04-09-1999 90056 004 ***150.00



Principal Place	e of Business	Mailing Address				
3118 GULF TO BAY BLVD 3118 GULF TO BAY BLVD 324						
CLEARWATER FL 33759 CLEARWATER FL 33759						DO NOT WRITE IN THIS SPACE
US		US				3. Date Incorporated or Qualifed 08/02/1991
		A. Maillean Address				4. FEI Number Applied For
Principal Place of Business 2a. Mailing Address						65-0279373 Not Applicable
21	# -A-	26 Suite Apt # etc			_	\$8.75 Additional
Suite, Apt. #, etc. Suite, Apt. #, etc.			*** **			5. Certificate of Status Desired Fee Required
City & Stat	е	City & State			_	6. Election Campaign Financing S5.00 May Be
23 28						Trust Fund Contribution Added to Fees
Zip			Coun	try		8. This corporation owes the current year Intangible
24	25	29	30			Personal Property Tax. Yes No
	9. Name and Address of Curren	t Registered Agent				10. Name and Address of New Registered Agent
PILIA	DED MONAGEM		Į:	B1	Name	•
KHADER, IBRAHIM				82 Street Address (P.O. Box Number is Not Acceptable)		
3118 GULF TO BAY BLVD #324						
CLE	ARWATER FL 33759			83		
			\ \frac{1}{2}	84	City	FI 85 Zip Code
dd Burrand	he the equipment Continue CO7 050	2 and 607 1509 Florida Statut	as the ab		- named o	corporation submits this statement for the purpose of changing its registered
l office or r	registered agent, or both, in the State im familiar with, and accept the obliga	of Florida. Such change was a	utnonzea i	by t	tnø corpoi	oration's board of directors. I hereby accept the appointment as registered
SIGNATURE						recultred when reinstating) DATE
	Signature, typed or printed name of registered ager	nt and trile if applicable. (NOTE ID DIRECTORS	Registered A	gent	t signature re	required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	PD OFFICERS AN	DELETE	1.1 TITL	F		Change Addition
NAME	KHADER, IBRAHIM	<u></u>	1.2 NAM			
STREET ADDRESS	3118 GULF TO BAY BLVD #3	24		_	ADDRESS	
CITY-ST-ZIP	CLEARWATER FL 33759	-,	1.4 CIT			
TITLE	AT	☐ DELETE	2.1 TITL			☐ Change ☐ Addition
NAME	AL-QASEM, MOHAMMED		2.2 NAM	Æ	- 1	
STREET ADDRESS		07	2.3 STR	EET	ADDRESS	3118 GULF to BAY BLUD #324 CLEARWATER FL 33759
CITY-ST-ZIP	ST PETERSBURG FL	ويريب وساوا الماليسي	2. 4 CIT	Y- ST	T-ZIP	CLEARWATER FL 33759
TITLE	STD	☐ DELETE	3.1 TITE	E		☐ Change ☐ Addition
NAME	BSEISU, AMJAD		3.2 NAM	Æ	1	
STREET ADDRESS	15625 PRESTON RD		3.3 STR	EET.	ADDRESS	
CITY-ST-ZIP	DALLAS TX		3.4. CIT	Y-ST	T-ZIP	
TITLE		☐ DELETE	4.1 TITL	E.		☐ Change ☐ Addition
NAME			4. 2 NA	ME		
STREET ADDRESS			4.3 STR	EET.	ADDRESS	
CITY-ST-ZIP_			4.4 CIT		r-zip	
TITLE		☐ DELETE	5.1 TITL		ŀ	☐ Change ☐ Addition
NAME			5.2 NAA			
STREET ADDRESS)				ADDRESS	,
CITY-ST-ZIP			5,4 CIT 6.1 TITL		I-ZIP	Change Addition
TITLE	1	☐ DELETE	0.1 IIIL	. .		Li Change Lij Addition i

CITY-ST-ZIP 14. 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 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, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS