

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000064749

**Entity Name:** SUBWAY 6680, INC.

**Current Principal Place of Business:**

SHOPPES @ 104  
14679 SW 104TH ST.  
MIAMI, FL 33186

**FILED**  
**Apr 24, 2017**  
**Secretary of State**  
**CC2144632588**

**Current Mailing Address:**

SHOPPES @ 104  
14679 SW 104TH ST.  
MIAMI, FL 33186

**FEI Number: 65-1129991**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

ROY, DAVID RESQ  
DAVID R. ROY, P.A.  
4209 N. FEDERAL HWY.  
POMPANO BEACH, FL 33064 US

*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

**Officer/Director Detail :**

Title P  
Name MYSOREWALA, IDRIS  
Address 10164 NW 31ST ST.  
City-State-Zip: SUNRISE FL 33351

Title V  
Name GHANIWALA, WAHID  
Address 13036 NW 14TH ST.  
City-State-Zip: PEMBROKE PINES FL 33028

Title T  
Name MOTEN, ANWAR  
Address 2863 SW 13TH DRIVE  
City-State-Zip: DEERFIELD BEACH FL 33442

Title S  
Name ABID, ABDUL A  
Address 10164 NW 31ST CT.  
City-State-Zip: SUNRISE FL 33351

Title D  
Name KARIM, MOHAMMED H  
Address 14679 SW 104TH ST.  
City-State-Zip: MIAMI FL

Title D  
Name MAJID, SHAFI  
Address 14679 SW 104TH ST.  
City-State-Zip: MIAMI FL

*I hereby 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 all other like empowered.*

**SIGNATURE: MYSOREWALA , IDRIS**

**P**

**04/24/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date