

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2005 8:00 am
Secretary of State

04-28-2005 90178 028 ***150.00

DOCUMENT # K72958

1. Entity Name
ONE STOP DISCOUNT BEVERAGE, INC.



Principal Place of Business

6691 N US HIGHWAY 1
COCOA, FL 32927-1932

Mailing Address

6691 N US HIGHWAY 1
COCOA, FL 32927-1932

DO NOT WRITE IN THIS SPACE



04252005 No Chg-P CR2E034 (10/03)

4. FEI Number
59-2932588

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

PATEL, ARUN I.
6365 BANKS AVE.
COCOA, FL 32927

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Arun I. Patel
Signature, typed or printed name of registered agent and title if applicable.

Arun I. Patel, Pres.

4-24-05

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD PATEL, ARUN I. 6365 BANKS AVE. COCOA, FL 32927
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD PATEL, MITA B. 6795 BELFAST AVE COCOA, FL 32927
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Arun I. Patel Arun I. Patel, Pres. 4-24-05

(321)631-1134

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #