FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 PM 5:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **K99928** **(9)**

1. Corporation Name
P & K FOOD STORES, INC.

Principal Place of Business	Mailing Address
%HARSHAD PATEL 2402 KINGDOM AVE MELBOURNE FL 32934	%HARSHAD PATEL 2402 KINGDOM AVE MELBOURNE FL 32934

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **07/05/1989**
3a. Date of Last Report: **05/01/1994**

2. Principal Place of Business (21)
2a. Mailing Address (26)
Suite, Apt. #, etc. (22) (27)
City & State (23) (28)
Zip (24) (29) County (25) (30)

4. FEI Number: **59-2969953** ☐ Applied For ☐ Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

6. This corporation has taxable intangible tax under S. 199.032 Florida Statutes. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

PATEL, HARSHAD
2402 KINGDOM AVE
MELBOURNE FL 32934

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Section(s) 607.0502 and 607.1508, Florida Statutes, the above named corporation submits the 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: Harshad Patel - President 4-13-95
(If changing Registered Agent, Registered Agent must sign) (If changing Registered Agent, Registered Agent must sign) (DATE)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
01 TITLE	D	11 TITLE	☐ Change ☐ Addition
02 NAME	PATEL, PRAVIN M	12 NAME	
03 STREET ADDRESS	58 JANICE DR	13 STREET ADDRESS	
04 CITY ST ZIP	SPOTSWOOD NJ	14 CITY ST ZIP	
01 TITLE	D	21 TITLE	☐ Change ☐ Addition
02 NAME	PATEL, HARSHAD	22 NAME	
03 STREET ADDRESS	2402 KINGDOM AVE	23 STREET ADDRESS	
04 CITY ST ZIP	MELBOURNE FL	24 CITY ST ZIP	
01 TITLE		31 TITLE	☐ Change ☐ Addition
02 NAME		32 NAME	
03 STREET ADDRESS		33 STREET ADDRESS	
04 CITY ST ZIP		34 CITY ST ZIP	
01 TITLE		41 TITLE	☐ Change ☐ Addition
02 NAME		42 NAME	
03 STREET ADDRESS		43 STREET ADDRESS	
04 CITY ST ZIP		44 CITY ST ZIP	
01 TITLE		51 TITLE	☐ Change ☐ Addition
02 NAME		52 NAME	
03 STREET ADDRESS		53 STREET ADDRESS	
04 CITY ST ZIP		54 CITY ST ZIP	
01 TITLE		61 TITLE	☐ Change ☐ Addition
02 NAME		62 NAME	
03 STREET ADDRESS		63 STREET ADDRESS	
04 CITY ST ZIP		64 CITY ST ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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.

SIGNATURE: Harshad Patel 4-13-95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (DATE)

007A007 CP