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

PROFIT CORPORATION ANNUAL REPORT

1998

131 UNIT S. BUENARENTURA BLVD.

Principal Place of Business D/B/A B.V.L. BERVERAGES & VIDEO

KISSIMMEE FL 34743



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L03410 (2)

RAM FOOD CORPORATION

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	Mailir	- Δ	NA.	000

D/8/A B.V.L. BERVERAGES & VIDEO 131 UNIT S. BUENARENTURA BLVD. KISSIMMEE FL 34743

FILED Jan 30 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

Date Incorporated or Qualified

Ì						07/20/1989		.,		
2. Principal F	Place of Business	2a. Mailing Addre	2a. Mailing Address			4. FEI Number	A	oplied For		
21		26	26			59-2958255	Not Applicable			
Suite, Apt. #, etc.		Suite, Apt. #,	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75	Additional		
22	22		27		5. Certificate of Status Desired	Fee R	equired			
City & State		City & State	City & State		6. Election Campaign Financing	\$5.00	May Be			
23		28	28			Trust Fund Contribution				
Zip	Country	Zip	°	Country	1	8. This corporation owes or has paid the curre		tangible		
24	25	25 29 30				Personal Property Tax due June 30. Yes X No				
ļ <u> </u>	9. Name and Address of Co	urrent Registered Agent		81		10. Name and Address of New Registered A	gent	i		
PATEL, SHAILESH R					Name			}		
D/I	B/A B.V.L. BERVERAGES & \	ADEO	82 Street Addre		Street A	ddress (P.O. Box Number is Not Acceptable)				
] 13	1 UNIT S, BUENARENTURA	BLVD.	ou divoley dance							
KI	SSIMMEE FL 34743		83				· -			
}				84	City		lec l 7in	Code		
ļ 1				04	City	FL	85 Zip	Code		
11. Pursuant	to the provisions of Sections 607	7.0502 and 607.1508, Florid	la Statutes, the	e above	e-named c	corporation submits this statement for the purpose of	hanging i	ts registered		
office or a	registered agent, or both, in the t am familiar with, and accept the r	State of Florida, Such chang obligations of Section 607 (ge was author 2505 Florida S	ized by Statutes	/ the carpo	oration's board of directors. I hereby accept the appo	intment as	registered		
ſ •	and according to	oungaments on position in						-		
SIGNATURE	Signature, typed or printed name of register	ed agent and title if applicable.	(NOTE: Regis	stered Age	ant signature n	required when reinstating) DATE		 .]		
12.	OFFICERS	S AND DIRECTORS	1	13.		ADDITIONS/CHANGES TO OFFICERS AND	DIRECTOR	RS IN 12		
TITLE	PST	DEI	LETE 1	.1 TITLE			Change	Addition		
NAME	PATEL, SHAILESH R		1	2 NAME	ŀ			1		
STREET ADDRESS	131 UNIT S BLV BLVD.		1	.3 STREET	ADDRESS			ſ		
CITY-ST-ZIP	KISSIMMEE FL 34743		1	.4 CITY - S	T-ZIP					
TITLE		DEI	LETE 2	.1 TITLE			Change	Addition		
NAME	ļ		2	2 NAME	1			}		
STREET ADDRESS			2	.3 STREET	ADDRESS					
CITY - ST - ZIP			2	. 4 CITY - S	ST-ZIP			Į.		
TITLE		DEL		1 TITLE			Change	Addition		
NAME			3.	2 NAME	Ì			Ì		
STREET ADDRESS			3	3 STREET	ADDRESS					
CITY-ST-ZIP			3.	.4. CITY-5	ST-ZIP			ļ		
TIFLE		DEI		TITLE			Change	Addition		
NAME			[4	. 2 NAME	1			1		
STREET ADDRESS					ADDRESS			ł		
CITY-ST-ZIP				4 CITY-S				}		
TITLE		DEL		1 TITLE			Change	Addition		
NAME			5	2 NAME	1		·	1		
STREET ADDRESS			•		ADDRESS			ľ		
CITY-ST-ZIP			1 1	4 CITY-S				}		
TITLE		DE		1 TITLE			Change	Addition		
NAME				2 NAME	- 1	•				
STREET ADDRESS					ADORESS					

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f). 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 trusted 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.

6.4 CITY-ST-ZIP

CITY-ST-ZIP

S. Parsteine REQUIRED