

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

May 06, 2008 08:00 AM
Secretary of State

DOCUMENT # P02000016163

1. Entity Name
SHREEJI KRUPA INC.



Principal Place of Business
800 34TH ST. NO.
SAINT PETERSBURG, FL 33714

Mailing Address
2595 54TH AVENUE NORTH
ST. PETERSBURG, FL 33714-1973

Ch # 2059
05/01/08



03122008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
04-3602266

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

PATEL, THAKOR
2595 54TH AVE. NO.
SAINT PETERSBURG, FL 33714

**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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U000000949385
06/03/08-80023-027 150.00

10. OFFICERS AND DIRECTORS

TITLE D
NAME PATEL, SURESH
STREET ADDRESS 2595 54TH AVENUE NORTH
CITY-ST-ZIP ST. PETERSBURG, FL 33714-1973

TITLE D
NAME PATEL, THAKOR
STREET ADDRESS 2595 54TH AVENUE NORTH
CITY-ST-ZIP ST. PETERSBURG, FL 33714-1973

TITLE D
NAME KAPADIA, SANGITA
STREET ADDRESS 2595 54TH AVENUE NORTH
CITY-ST-ZIP ST. PETERSBURG, FL 33714-1973

TITLE ST
NAME PATEL, CHITTARANJAN
STREET ADDRESS 2595 54TH AVE. NO.
CITY-ST-ZIP SAINT PETERSBURG, FL 33714

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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 exemptions contained in Chapter 119, 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:

Thakur M Patel

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/30/08 813-785-7406

Date

Daytime Phone #